SELECTED DEMOGRAPHIC CHARACTERISTICS OF SCHOOL AGE RESIDENT PATIENTS IN STATE MENTAL HOSPITALS

by

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CHAPTER I

Introduction

Early demographic and epidemologic studies dealt primarily with the incidence and the prevalence of mental disorders in a particular population (Faris and Duham, 1939; Green, 1939; Queen, 1940; Mowrer, 1942; Schroeder, 1942; Hollingshead and Redlick, 1958). These researchers called attention to the importance of demographic and epidemologic surveys which could be used as a possible vehicle in the planning and evaluation of mental health programs.

The first conference on Psychiatric Epidemology and Mental Health Planning was held in Baltimore, Maryland and was sponsored by the American Psychiatric Association. The results of this conference are published in report form in Volume 22 of the American Psychiatric Association (Monroe, Klee and Brody, 1967). The report consists of a number of papers providing demographic and epidemologic data concerning biometric methods as applied to the field of psychiatry, implications for psychiatric etiology, and planning preventive and service facilities for the mentally ill. Kramer's paper (1967) places emphasis upon the use of demographic and epidemologic data:

> The main purpose of epidemologic studies is to arrive at a better understanding of the nature and causes of a disease and factors associated with its distribution so as to be able to eventually prevent its occurrence or at least bring it under control (p. 50).

He adds later that:

> Among the major goals of mental health programs are modification of existing patterns of utilization of psychiatric facilities, particularly those related to state hospitals and provision of coordinated and integrated community services that will provide continuity

> of care and assist in maintaining patients in their own communities and within their own homes (p. 56).

Brody and Klee (1967) reflect an awareness that knowledge of the epidemology of mental disorders is limited, but data is available which contributes to the planning and evaluation of mental health programs. Specific uses of epidemologic data include associations between age, sex, family characteristics, spatial mobility, and social isolation (Kramer, 1967). Realizing that epidemologic data is not the panacea for total mental health planning and evaluation, it does, however, provide a systematic approach to hospital administration and management and is a necessary and an excellent method for the formation of important baseline data or information regarding factors related to home, community, school and institutional care.

Purpose of Study

The purpose of this study is to provide interested persons in the State of Kansas with a brief descriptive account of the historical development of institutions in Kansas and to provide descriptive comparisons of Kansas and national resident patients in state mental hospitals over an eight year period for two specific age groups. The first group is comprised of resident patients of all ages and of those under 24 years of age who were institutionalized at the end of each fiscal year (June 30) as resident patients in the three state mental hospitals of Osawatomie, Topeka, and Larned from 1961 to 1968. This descriptive comparison will be accomplished by comparing selected demographic characteristics (age, sex and diagnoses) of these youths with the same data reported nationally by the National Institute of Mental Health. Secondly, a more indepth account will be presented of the

group of hospitalized youths in Kansas between 5 and 19 years of age for the year 1970, on selected demographic characteristics of age, sex, diagnoses, county of residence and last school attended. This indepth account will be accomplished by comparing these patients on selected characteristics and hospital placement, i.e., Osawatomie, Topeka, or Larned.

More specifically, the objective of this study is to provide descriptive comparisons in relation to the following questions:

What has been the population movement pattern of the hospitalized resident patients for all ages over an eight year period, 1961 to 1968, for the United States?

What has been the population movement pattern of the hospitalized resident patients for all ages over an eight year period, 1961-1968, for the State of Kansas?

Is the hospitalized resident patient population changing by age (under 24 years) over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population changing by age (under 24 years) over an eight year period, 1961 to 1968, for the State of Kansas?

Is the hospitalized resident patient population changing by sex (all ages) over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population changing by sex (all ages) over an eight year period, 1961 to 1968, for the State of Kansas?

Is the under 24 year old resident patient population changing by sex over an eight year period, 1961 to 1968, for the United States?

Is the under 24 year old resident patient population changing by sex over an eight year period, 1961 to 1968, for the State of Kansas?

Is the hospitalized resident patient population under 24 years of age changing by diagnostic category over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population under 24 years of age changing by diagnostic category over an eight year period, 1961 to 1968, for the State of Kansas?

The questions thus far have dealt only with the comparisons between the hospitalized resident patient populations of the United States and Kansas. The following questions and hypotheses will be directed toward the second phase of this study; an in depth account of the hospitalized youths between 5 and 19 years of age for the year 1970, on selected characteristics and hospital placement, i.e., Osawatomie, Topeka, or Larned:

Hypotheses

There are no significant differences between the county of residence for a patient and hospital placement.

There are no significant differences among diagnostic categories and hospital placement.

There are no significant differences between the sex ratio of males to females among the three state hospitals.

Questions

Is age instrumental in admitting school age (5-19 years) resident patients to a particular state hospital in Kansas?

At what age do most school age (5-19 years) resident patients generally get admitted to state mental hospitals in Kansas?

Is hospital admission influenced by the existence of special classes for the emotionally disturbed in the community?

CHAPTER II

Background and Review of Literature

Interest in the etiology, dynamics, and treatment of mental illness is of ancient origin. Comprehensive reviews related to the historical aspects of mental illness are provided in several sources (Menninger, 1944; Deutsch, 1949; Lewis, 1941). These reviews cover the biological, psychodynamic, and social-cultural aspects of mental illness. While realizing that each of these areas are composed of a number of micro components or subgroups, this study will be limited to investigations dealing with the social-cultural characteristics of mental illness.

The review of the literature will be limited to those specific studies describing demographic and epidemologic surveys which provide descriptive data regarding the relationships between age, sex, diagnosis, education, and mental illness in children.

It is tenuous to differentiate between demographic and epidemologic studies, since the distribution and composition of a population, as well as the characteristics which describe its members, are important for all descriptive social demographic and epidemologic studies. Therefore, for the purpose of classification, these two approaches will be considered the same throughout this review.

Studies dealing with mental illness in children differ considerably from those studies concerned with adults. So several considerations must be kept in mind when viewing mental illness in children. First of all, mental illness is judged quite differently in children than it is in adults; children are not usually judged mentally ill by

the types of behaviors used for adult mental illness. It is vital to remember that children rarely seek help for emotional disturbance on their own. Children present more developmental and sex differences than do adults (White, 1966). As Erlich, Gallagher, and Levinson (1958) state, "We would expect younger and older patients to experience and relate to a mental hospital in somewhat different ways."

The characteristics of some 960 children referred to residential treatment centers in New York state in 1956 was completed by Bloch and Behren (1959). The authors found that the demographic characteristics of this group were as follow: the ratio of boys to girls was five to one; their families were unstable, riddled with pathology, poorly educated, and subsisting on a marginal income; and less than one quarter of these children had lived only in their natural homes--forty percent had lived in four or more homes or institutions. These children and their families had been in touch with a variety of social agencies at an early stage, most of them before nine years of age. The agencies had diagnosed, rediagnosed, referred, and placed these children, but few received anything that could actually be termed treatment. Bloch and Behren (1959) state:

> Most of these children first expressed their difficulties in school and were referred to agencies or professional persons for this reason...Behavioral difficulties in school were reported for 65 percent of these children; 52 percent had learning difficulties; 34 percent had reading problems; and 30 percent were excessively truant (p. 30).

A review of school adjustment prior to admission was also of concern to Rubin (1962). With a sample of 97 children, he found that only 13 were said to have no school problems. Of the 97, twenty-eight (29%) were reported to have behavior disturbances, eleven (11%) had academic

difficulties, and forty-five (46%) had a combination of behavior disturbances and academic difficulties. From this latter group of children, 84 total, twenty (24%) had been excluded from school. The authors also noted a significant sex difference in that males outnumbered females 70 to 27 or approximately 3 to 1.

Two years later, Johnson and Rubin (1964) conducted a follow-up study on the same children studied by Rubin in 1966 who had been discharged from the institution. They found that 51 percent of the children were now in open schools, 24 percent were psychiatric patients in state hospitals, 6 percent were at home, and 4 percent could not be located. They also found the following related to diagnoses: the most common diagnostic category was brain syndrome (33%), followed by transient situational personality disturbances (20%), personality disorders (19%), psychoneuroses (15%), and psychosis (12%).

A similar study by Stone and Rowley (1964) checked the achievement of 116 children seen in an outpatient psychiatric clinic. They found a sex differential of 82 (males) to 34 (females). Using mental age as a point of departure for reading achievement, they found that 51.7 percent of the children were classified as retarded. However, when chronological age was used as a point of departure for reading achievement, 59.5 percent were retarded, 20.7 percent were normal, and 19.8 percent were considered advanced.

A rather comprehensive study of 55 hospitalized adolescents using case studies to illustrate the demographic characteristics of their sample was compiled by Hartman, Glasser, Greenblatt, Solomon and Levinson (1968). Seventy percent of the population were either 15 or 16 years old at the time of admission. Thirty (54.5%) were functioning

one or more years below average in their school performance and only four (7%) were functioning above their chronological age level in educational terms. Twenty-four of the children were diagnosed as schizophrenic (44%), two as manic depressed (4%), six as having character disorders (11%), fourteen were classified as having adjustment reactions to adolescence (25-26%), and nine were characterized as psychoneurotic (16%). In only four of the fifty-five cases was the question of organicity a possible contributing factor for hospitalization.

O'Neal and Robins (1958) completed a series of follow-up studies on children who were seen in an outpatient clinic in the 1920's. Their findings for their control group are particularly relevant here. As controls, they selected children who were matched with their experimental subjects for sex, race, age, residence, and I.Q. In addition, the control group had to be making a normal adjustment in school. Normal adjustment meant that they had no extensive school absences, had not repeated a grade, had no recorded disciplinary action, and had an I.Q. of at least 80. In their follow-up thirty years later, the authors observed the striking degree of mental health in the control group. On the other hand, the experimental subjects who had been seen at the mental health clinic, showed a high proportion of adult sociopaths and of adult mental illness. This study suggests that a reasonably good school adjustment may have some positive relationship to later successful adult adjustment.

The distinction between mental illness and school maladjustment in children is confusing, except to say that they are not synonymous. From school maladjustment comes a subpopulation of referrals to private practitioners and agencies, from which some children are placed in mental

hospitals or residential treatment centers. But not all cases of school maladjustment are referred, and not all are institutionalized. White and Harris (1961) state:

> The inability to adjust to school--which means the poor learner, the poor reader, the behavior problem, the truant, the dropout, the discipline problem, the emotionally disturbed, and the peer-rejected--is associated more frequently with the child whose family is of lower social class status and the child with lower tested intelligence (p. 47).

The need for prevention of emotional disturbance should be an active part of the ideal public school. Greenblatt, Emery and Glueck (1967) indicate, "the need for prevention and treatment is at the first grade or earlier." Rabinow (1959) states, "Unless the schools adapt their programs to meet the needs of disturbed and maladjusted children, state hospitals will continue to bulge with psychotic patients." To make substantial changes in the mental health of our adult population of the next generation is to devote at least 75% of mental health resources toward helping children now (Guerney and Flumen, 1970).

Morse, Cutler and Fink (1964) surveyed some 117 school programs for the emotionally disturbed throughout the United States. They reviewed certain factors regarding age, sex, intelligence, and academic achievement. Their results revealed that these children in school programs suffered a significant degree of academic retardation, even though intelligence quotients were normally distributed. The general intellectual level seemed to be above average with 67% of the males and 70% of the females having I.Q.s over 100. More than half of the sample was diagnosed as neurotic (60%), with the majority of these children showing significant acting out behavior. Another large group was the primitive-neglected (16%). The authors also found a significant sex difference

and class placement. Boys made up approximately 83% and girls approximately 17% of all students in public school classes for the emotionally disturbed with an age range of five to fifteen. The mean age upon admission, at the time of the study, for boys was 9.4 years and 9.8 years for girls.

Thus far the review of the literature has revealed many demographic characteristics associated with mental illness in children. Additional demographic information on a national scope is provided by the National Institute of Mental Health.

A number of studies conducted by the National Institute of Mental Health, NIMH, have attempted to show the rate for children has increased at an accelerated pace during the last decade. This marked rise cannot be explained altogether by pointing to the relative increase in the number of children in the general population.

A survey by the National Institute of Mental Health (NIMH, 1965) revealed that during 1963, about 4,000 children under the age of 15 years and 27,000 between the ages of 15 and 24 years were in mental institutions in the United States.

A later study (NIMH, 1968) indicated that approximately 55,000 children under 18 years of age were hospitalized as patients in public mental hospitals and general hospitals in the United States. This is approximately a 56% increase in just three years from the 1965 study to the 1968 study.

Projections for the decade 1963-73 (NIMH, 1966) reflect that for the age group 15 years old and younger there will be an increase of 13% in the country's population. However, in the mental hospitals this same age range of children will increase by 164%. For older

children between 15 and 24 years of age one can expect a 36% increase in the general population and a 70% increase in the wards of mental hospitals.

Surveys by National Institute of Mental Health also support the notion that males out number females in resident hospital placement throughout the United States.

During one 15 year period from 1950 to 1965 the number of males in the general population, age 10 to 14 years, did not quite double, however, there was almost a sixfold increase in their numbers in mental institutions (NIMH, 1965; 1968).

Hurder (1967) found that in reporting on psychiatric facilities being utalized throughout the United States, Males outnumbered females for patients under the age of 25 years.

The two changing demographic characteristics of age, and sex have been discussed thus far for resident patients in mental hospitals in the United States. However, another important characteristic, diagnosis, is also changing for the same school age population.

Data, again from NIMH (1965) shows that among public mental hospital resident patients under eighteen, 43% were diagnosed as psychotic, 27% as retarded or suffering acute and chronic brain syndromes, and the remainder as victims of a variety of personality disorders reflecting both constitutional deficiencies and environmental trauma.

A later study (NIMH, 1970) regarding state trends of resident patients, under 18 years of age, in state and county mental hospitals for the period 1966-1968, showed an increase in the classifications transient personality disorders and mental deficiency.

While numerous demographic studies concerned with age, sex, and

diagnoses are evident on the national level, only one demographic study in the state of Kansas was found which dealt with age and population changes.

Clark and Cooley (1968) did a comparative study on new admissions at Topeka State Hospital. Their results indicated that in 1943, only 17% of admissions were under 25 years of age while 31% were over 65 years of age. In 1967, 35.7% of all first admissions were under 25 years of age. Their findings reflect a trend toward a more predominance of younger patients. Their study supports the general patient trends as reported by the National Institute of Mental Health which also shows an increase in younger patients in mental institutions.

In reviewing the various research concerning demographic studies of mental illness in children, one must be cautioned to look closely at the classification system employed. As Temerlin and Trousdale (1966) have noted, "diagnoses may be grossly inaccurate when made in a clinical setting, under the influence of prestige suggestion, and in the absence of a generally accepted definition of mental illness, and mental health." More recently, the problem of classification has been somewhat simplified through the use of the Diagnostic and Statistical Manual of Mental Disorders (APA, 1968) and this classification system for mental disorders will be adhered to throughtout this study.

Summary

Throughout this chapter, a series of references was made concerning the demographic characteristics of age, sex and diagnosis in relation to school age children with mental illness. It was pointed out that most children first expressed their difficulties in the school. These

difficulties were generally recognized in the form of poor school adjustment which often resulted in academic failure and/or in behavioral disturbances. Some children, because of these difficulties, are referred to emotionally disturbed public school programs, mental hospitals, private practitioners, or other agencies (O'Neal and Robins, 1958; Bloch and Behren, 1959; White and Harris, 1961; White, 1961; Rubin, 1962; Stone and Towley, 1964; and Hartman, 1968).

The review of the literature in this chapter shows strong support of the idea that emotional disturbance is more predominent among boys than girls. The sex ratio of boys to girls ranged from approximately 5:1 (Bloch and Behren, 1952) to 8:3 (Stone and Rowley, 1964).

Specific data related to age is somewhat vague. However, there is a marked increase in the resident patient population in state hospitals in the United States for the specific age groups of "under 15" and "15 to 24 years" (NIMH, 1965, 1966, and 1968). Hartman (1968) indicates that 70% of the adolescent population he investigated were 15 or 16 years of age at the time of hospital admission. On the other hand, Morse, Cutler and Fink (1964) reported that the average age for the boys was 9.4 years and 9.8 years for the girls in public school classes for the emotionally disturbed.

The literature associated with the diagnosis of mental illness is often confusing. This confusion is partly due to the use of differing classification systems in public schools as compared to mental hospitals. However, even in the studies dealing with diagnosis of school age children in mental or residential hospitals, the data is not consistent as one considers the most frequent diagnostic category in which children

are classified. Bloch and Behren (1959) and Rubin (1962) reveal that the largest proportion of children is classified as behavioral disorders. Johnson and Rubin (1964) and NIMH (1970) state that brain syndrome is the category with the largest population. Hartman (1968) and NIMH (1965) reflect that the psychotic classification is used more frequently. Morse, Cutler and Fink (1964) found that most (60%) of the public school population in classes for the emotionally disturbed were classified as neurotic.

CHAPTER III

Historical Overview of Three State Mental Institutions in Kansas

One of the main objectives of this study is to provide interested persons in the state of Kansas with a brief descriptive account of the historical development of institutions in Kansas. An understanding of historical development may help us understand present data. This particular chapter deals specifically with the historical development of Osawatomie State Hospital, Topeka State Hospital, and Larned State Hospital.

A concern for the necessity of providing care for the insane in Kansas was first discussed in the territorial assembly in 1855. A law was enacted at that time for the appointment of caretakers or guardians for the insane or mentally ill. No major efforts were actually developed for the care of the insane until the legislature of 1863, when a commission was appointed by the governor to investigate and to determine the location of the first State Insane Asylum in Kansas (Twenty-Sixth Biennial Report of the Osawatomie State Hospital, 1928).

Gish (1966) makes the following reference to the actual political action taken by the lawmakers of Kansas in establishing the first institution in Kansas at Osawatomie.

> On the 16th of January, 1863, a few days after Abraham Lincoln signed the Emancipation Proclamation, a bill was introduced in the Kansas House of Representatives for the locating of the "state insane asylum" at Wyandotte. As the maneuvering of the session continued, Paola was another of the towns considered, but the small and somewhat remote town of Osawatomie, with its decisive record of opposition to slavery received the vote of the lawmakers. The House voted for the Osawatomie location 56 to 6 and the Senate finalized the decision with a vote of 20 to 1 on February 29, 1863 (p. 21).

Two years later in 1865, the Kansas legislature authorized the construction of its first institution for the mentally ill in the state.

According to the first annual reports (Gish, 1966) Dorothea Dix found time to visit the state's first asylum for the insane during the early stages of construction. The architectural drawings allowed her to visualize a typical Kirkbride type of asylum. Among the twenty-six rules or "propositions" in Thomas Kirkbride's system for construction of hospitals for the mentally insane are:

> Each hospital for the insane should be located in the country, not less than two miles from a large town, and easily accessible at all seasons; it should have not less than fifty acres of land devoted to gardens and pleasure grounds for the patients; every state hospital should have at least one hundred acres; the highest number that can with propriety be treated in one building is 250 patients, while 200 is a preferable maximum; buildings should be constructed of stone or brick and as far as possible, made fireproof (pp. 160-162).

The propositions set forth by Kirkbride were accepted by the Association of Medical Superintendents and are visible in Kansas's State Institutions.

Eight years after the legislature of 1865 authorized appropriations for construction of the State Insane Asylum in Osawatomie and the appointment of a board of trustees, an administrative power struggle developed. The struggle was between local and state control and was resolved by the legislature of 1873 by establishing the "Board of Control Law of 1873." This new board replaced what was once called the old Board of Trustees and thereby eliminated local or regional control of the Asylum.

T.C. Biddle, superintendent of the Kansas State Insane Asylum at Osawatomie, states in the Tenth Biennial Report (1896) that:

> It would seem that the time has arrived in Kansas when the state charitable institutions should be divorced from politics. Men capable of managing one of our insane asylums, and who have made the care and treatment of the insane a study, are not readily found, and when they are, their positions should not be subject to the vicissitudes of partisan politics. The attendents, or working force, in these institutions should be selected just as the merchant, the farmer, or the manufacturer selects his help, with qualification, adaptability and experience as the test. The same is true of the other state institutions. Those who secure and hold their positions through what is termed "influence" seldom contribute to the better discipline or successful management of an institution (p. 4).

Nine years after Biddle made the above statement, a law was passed in 1896, Section 38 of the Board of Control Act, Chapter 475, Laws of 1905, which provided authority to the superintendents to appoint his assistants and all those working under his supervision.

During this interim period of political involvement and struggle, increasing patient population was evidenced. There came a growing demand for additional facilities for the care and treatment of the insane in Kansas.

The demand for additional facilities forced the legislature to consider establishing another state institution. The historical account of this new institution at Topeka, Kansas is given in the Seventh Biennial Report of the Kansas State Asylum at Topeka, 1890. Again the Kirkbride philosophy was followed in the construction of the Asylum.

> The act providing for the erection of an insane asylum at Topeka took effect March 18, 1875. In compliance with the terms of this act, the county of Shawnee and the City of Topeka gave to the state the original tract of eighty acres, upon which the first buildings were erected. One hundred acres were subsequently added by purchase making a total of one hundred and eighty acres. In every respect, except that it is too small, the site is a most admirable one. The main group of buildings comprised five ward buildings, together with the hall building, the kitchen, bakery, laundry, shops, etc.; all of the contemplated main

> group except one ward building and the center building; the temporary quarters for the offices being in one end of one of the ward buildings. These are plainly but substantially built of local limestone, in rock-faced broken ashlar of varied tints of gray, yellow and brown, with olive trimmings, giving a soft, warm, pleasing effect. In addition, there is a detached building of red brick for 250 chronic patients, and also the necessary adjuncts to an institution of this character. The present buildings can properly provide for 700 patients (the total resident population at this time was already 758) (pp. 11-12).

Some eleven years after the outset of the official opening of the Topeka State Asylum in 1879, one could see the marked increase in patient population. In 1879, there were accommodations for 135 patients as contrasted with 758 actual patients as reported by the 1890 Biennial Report of the Kansas State Asylum at Topeka. With a growing concern for treatment of those individuals housed in the state's institutions, the legislature of 1901 officially changed the name from "Topeka Insane Asylum" to "Topeka State Hospital" (Topeka State Hospital Biennial Report, 1970).

The concept of "hospital" rather than "insane asylum" reflects a concern for treatment instead of custodial care of patients. However, Carmichael, the Superintendent of Osawatomie State Hospital, states: (Twenty-Second Biennial Report, Osawatomie State Hospital, 1927)

> Some years ago (1901) the state legislature changed the name of this institution from "Osawatomie Insane Asylum" to the more high sounding type of "Osawatomie State Hospital." Since that time they have done nothing to support the new title "hospital." The institution remains today as it was at its foundation in 1863--an asylum, a place of detention, without means of administering curative treatment to the unfortunates consigned to its care, notwithstanding repeated and earnest requests for the necessary equipment... (p. 8).

The early hospital operational philosophy was to use all available facilities, and all possible patients as a work force in whatever humane

way necessary in order to present a minimal budget to the legislature.

The philosophy of "adequate custodial maintenance" for the patients continued in the state's mental hospitals until the newspaper coverage of 1948 and the changes that began in the early 1950's which dramatically improved the care and treatment of Kansas mental patients (Kansas Biennial Report, 1960). One particular report which dramatically improved the care and treatment of Kansas mental patients was published by a news reporter in 1948 (Thirty-Seventh Biennial Report of the Topeka State Hospital, 1950):

> Inside, behind the locked doors and barred windows, he discovered 1,800 patients 'cared for' by three doctors (including the acting superintendent), one nurse, and 116 untrained, overworked, underpaid attendants. From ward he went, past patients in straight jackets, patients bound to beds, through buildings long since condemmed, and finally back to the outside...you sense the air of utter hopelessness, the penal atmosphere...; you cannot realize that these are fellow Kansans for whom you, through legislature, have contracted to provide medical care. You know it is probably sinful and contrary to your knowledge of medical science, but you find yourself thinking that most of these people would be better off dead (p. 9).

As a result of this public exposure of the state mental institutions, great strides in them were made to improve the care and treatment of patients. Up to this time there are few references and apparently little emphasis on care and treatment for children in the state institutions. However, through the cooperation with the Menninger Foundation and Menninger School of Psychiatry, a training and education program was initiated January 1, 1950 (Thirty-Seventh Biennial Report of Topeka State Hospital, 1950).

The Thirty-Eighth Biennial Report, Topeka State Hospital (1952) states:

> Although there had always been a number of children under the age of eighteen in this hospital since it was first organized, no special provisions had been made for them. In November 1951, an out-patient clinic was established for children patients to which any child in the state could come for examination and treatment. At the same time plans were made for the remodeling of one of the hospital's cottages as an in-patient unit for children between the ages of twleve and eighteen who needed hospital treatment. This unit will be open approximately November 1, 1952...This still leaves no treatment center for the many younger children up to the age of 12 (p. 18).

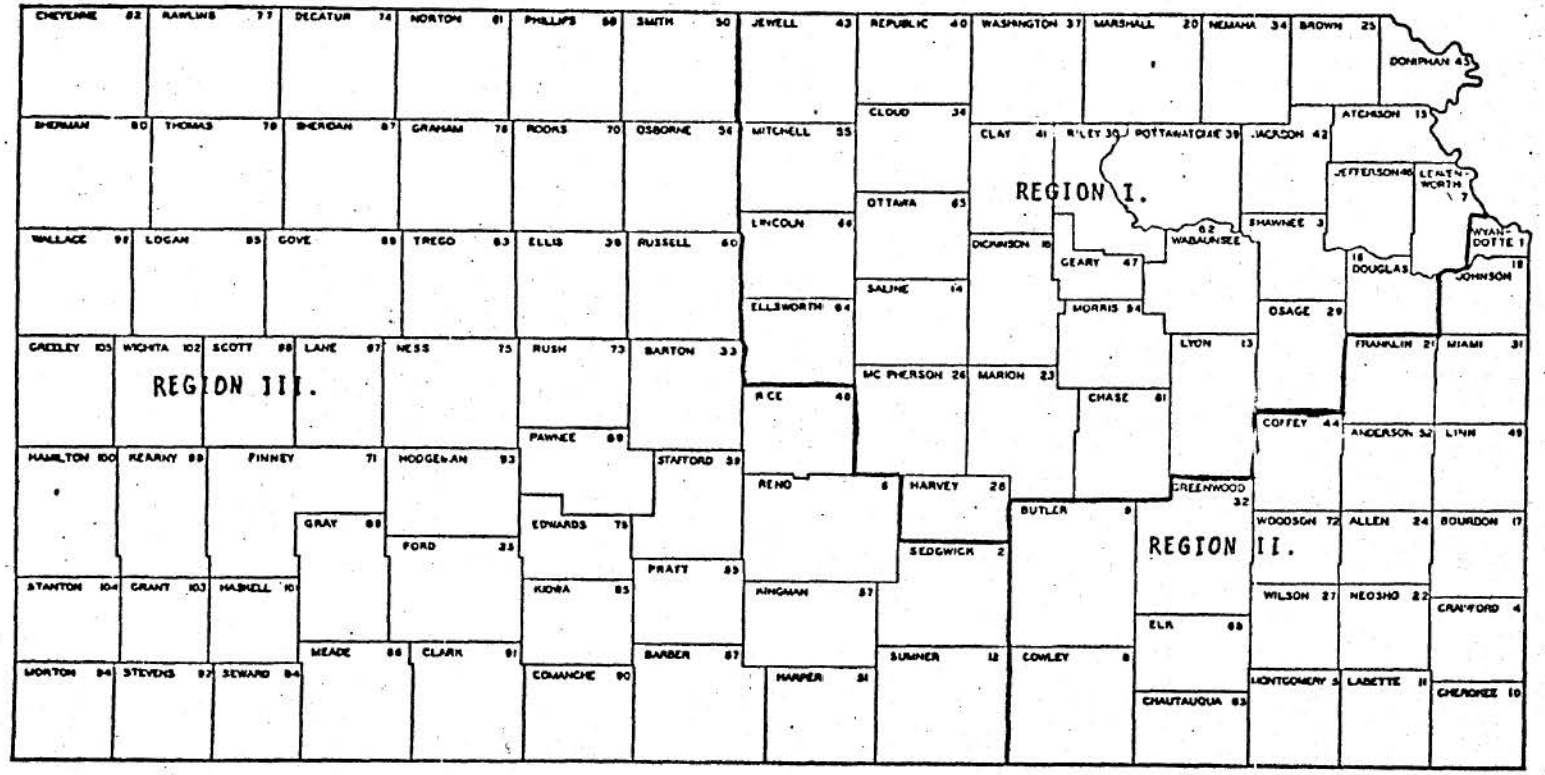
Services for children at Topeka State Hospital were improved with the addition of the adolescent unit mentioned above. A preadolescent unit was added in 1959 and both were combined as the Kansas Treatment Center for Children, later renamed Children's Service (Kansas Biennial Report, Topeka State Hospital, 1960).

The Topeka State Hospital opened a complete comprehensive centralized educational program for adolescents for the first time in 1969. Capital City High, the name of the hospital school, cooperates in conjunction with the Topeka Public School System, thereby making the transition from hospital to community less tenuous.

The State of Kansas utilizes a relatively new concept for treatment of the mentally ill based on a method of hospital organization called the "Kansas Plan." The Kansas Plan was first introduced in 1960, and under this plan each of the three hospitals, Topeka State, Larned State, and Osawatomie State, admitted patients according to counties and thereby allowing patients to remain in the same section within each hospital throughout their entire hospitalization. This innovative approach to hospital organization was never fully implemented in Kansas until July 1, 1968 (Topeka State Hospital's Clinical-Educational Services Memorandum No. 7, 1968). Figure 1, a map of Kansas, indicated how the state is

FIGURE 1

"The Kansas Plan"



Region I. Topeka State Hospital

Region II. Osawatomie State Hospital

Region III. Larned State Hospital

divided into three regions as suggested by the "Kansas Plan." Region I is serviced by Topeka State Hospital and includes 32 counties. Region II is serviced by Osawatomie State Hospital and serves 21 counties. Region III includes 52 counties and is serviced by the Larned State Hospital.

Summary

Kansas, like most states, established "insane asylums" to house the mentally ill in the late 1800's. Although the "insane asylums" officially became "state hospitals" in the early 1900's, it is only in recent years that the social and economic values of effective hospital treatment for the mentally ill have been widely recognized and accepted. Historically throughout the years, the changing functions of the institutions, based upon the needs of the citizens of Kansas and progress in treatment programs, are reflected in the various changes in names of the institutions. As the social and economic values of the citizens of Kansas progressed, so did the treatment programs. It was not until some 60 years after the first state hospital was established that services specifically for emotionally disturbed children became available. The establishment of the Kansas Treatment Center for children in 1959 became a part of the Topeka State Hospital and was charged with care and treatment for pre-adolescents and, in addition, some adolescents are capable of receiving treatment in adult wards of the hospital. The Topeka State Hospital opened a complete comprehensive centralized educational program for adolescents for the first time in 1969. This educational program is an integral part of the Topeka Public School System, making the transition from hospital to community somewhat less tenuous for school age children.

Kansas has also taken the lead in hospital organization called the "Kansas Plan." This approach is based on hospital service by regions, thereby serving the entire state with the needed mental health services.

CHAPTER IV

Procedures

The central purpose of the study was twofold: First, to provide descriptive comparisons of resident school age patients under 24 years of age in the three state mental hospitals of Osawatomie (OSH), Topeka (TSH), and Larned (LSH) from 1961 to 1968 on selected demographic characteristics (age, sex, and diagnosis) with the same data reported nationally by the National Institute of Mental Health. Secondly, to develop a more in depth account of resident patients between 5 and 19 years of age, inclusive, for the year 1970, on selected demographic characteristics of age, sex, diagnosis, county of residence and last school attended. It is hoped that this study will provide baseline data or information regarding factors related to home, community, school and institutional care to hospital administration and management in the State of Kansas.

The Population

The subjects for the Kansas population in the eight year descriptive comparison section, Phase I, of the study must have been active patients in either of the three state hospitals (OSH, TSH, and LSH) as of June 30 for any year between 1961 and 1968 inclusive. The national population used in Phase I was the sum total of all active patients in state and county mental hospitals throughout the United States as reported to the National Institute of Mental Health (1970).

The subjects in Phase II, the in depth comparison of resident patients in the three state mental hospitals, i.e., OSH, TSH, and LSH, on selected demographic characteristics for the year 1970, were active patients on June 30, 1970.

Collection of Data

Through the cooperation of the Division of Institutional Management, Department of Social Welfare, Topeka, Kansas, hospital records, census data, Biennial Reports, End of Year Reports, reports to NIMH, and computer printouts on patient data were made available for this investigation.

The primary source related to the national data is published annually by the Office of Biometry, National Institute of Mental Health in Patients in Mental Institutions, Part II, State and County Mental Hospitals, 1950-1966, and Patients in State and County Mental Hospitals (1970). Data related to characteristics (age, sex, and diagnosis) published in the above was the main purpose of limiting characteristics comparisons between the United States resident patient population with those resident patients in the three state mental hospitals in Kansas.

Analysis of Data

Information obtained from Phase I and Phase II of the study will be summarized, and presented, when appropriate, in tabular form and comparisons will be made within each Phase. Several hypotheses, stated in the null form, will be investigated. The .01 level of significance has been established to test the null hypotheses.

The questions and hypotheses being addressed are:

Phase I

Questions:

What has been the population movement pattern of the hospitalized resident patients for all ages over an eight year period, 1961 to 1968, for the United States?

What has been the population movement pattern of the hospitalized resident patients for all ages over an eight year period, 1961 to 1968, for the State of Kansas?

Is the hospitalized resident patient population changing by age (under 24 years) over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population changing by age (under 24 years) over an eight year period, 1961 to 1968, for the State of Kansas?

Is the hospitalized resident patient population changing by sex (all ages) over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population changing by sex (all ages) over an eight year period, 1961 to 1968, for the State of Kansas?

Is the under 24 year old resident patient population changing by sex over an eight year period, 1961 to 1968, for the United States?

Is the under 24 year old resident patient population changing by sex over an eight year period, 1961 to 1968, for the State of Kansas?

Is the hospitalized resident patient population under 24 years of age changing by diagnostic category over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population under 24 years of age changing by diagnostic category over an eight year period, 1961 to 1968, for the State of Kansas?

Phase II

Hypotheses

There are no significant differences between the county of residence for a patient and hospital placement.

There are no significant differences among diagnostic categories and hospital placement.

There are no significant differences between the sex ratio of males to females among the three state hospitals.

Questions

Is age instrumental in admitting school age (5-19 years) resident patients to a particular state hospital in Kansas?

At what age do most school age (5-19 years) resident patients generally get admitted to state mental hospitals

in Kansas?

Is hospital admission influenced by the existence of special classes for the emotionally disturbed in the community?

CHAPTER V

Results

As mentioned previously, the purpose of this study was twofold. Phase I was to provide descriptive comparisons concerning youths under 24 years of age who were institutionalized in state mental hospitals in Kansas and the U.S. on selected demographic characteristics (age, sex, and diagnosis). Phase II was to be a more indepth account of the youths between 5 and 19 years of age for the year 1970, on selected demographic characteristics of age, sex, diagnosis, county of residence and last school attended, as compared with hospital placement, i.e., Osawatomie, Topeka, or Larned.

Phase I

The particular questions being investigated in Phase I are:

What has been the population movement pattern of the hospitalized resident patients for all ages over an eight year period, 1961 to 1968, for the United States?

What has been the population movement pattern of the hospitalized resident patients for all ages over an eight year period, 1961 to 1968, for the State of Kansas?

Is the hospitalized resident patient population changing by age (under 24 years) over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population changing by age (under 23 years) over an eight year period, 1961 to 1968, for the State of Kansas?

Is the hospitalized resident patient population changing by sex (all ages) over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population changing by sex (all ages) over an eight year period, 1961 to 1968, for the State of Kansas?

Is the under 24 year old resident patient population changing by sex over an eight year period, 1961 to 1968, for the United States?

Is the under 24 year old resident patient population changing by sex over an eight year period, 1961 to 1968, for the State of Kansas?

Is the hospitalized resident patient population under 24 years of age changing by diagnostic category over an eight year period, 1961 to 1968, for the United States?

Is the hospitalized resident patient population under 24 years of age changing by diagnostic category over an eight year period, 1961 to 1968, for the State of Kansas?

Before patterns or comparisons can be established for either the United States or Kansas hospital residents, a review of general population trends are in order. Table 1 contains the annual estimates of the total general population of the United States by special age groups over an eight year period (1961 to 1968).

Table 1

ANNUAL ESTIMATES OF THE TOTAL POPULATION OF THE UNITED STATES INCLUDING ARMED FORCES OVERSEAS, BY SPECIAL AGE GROUPS: 1961 to 1968

(Numbers in Thousands)

Year	Total All Ages	Under 15	15-24	25-34	35-44	45-64	65 and Over
1961	183,756	57,672	25,255	22,658	24,403	36,756	17,013
1962	186,656	58,191	26,870	22,438	24,531	37,316	17,311
1963	189,417	58,861	28,190	22,339	24,594	37,869	17,565
1964	192,120	59,454	29,482	22,317	24,564	38,438	17,863
1965	194,592	59,878	30,730	22,369	24,438	39,015	18,162
1966	196,920	60,040	31,960	22,606	24,249	39,601	18,464
1967	199,188	59,965	33,036	23,092	23,984	40,194	18,796
1968	201,166	59,648	33,651	23,966	23,649	40,768	19,129

Note.-1961 to 1963, Current Population Reports; Population Estimates, Series P-25, No. 321, November 30, 1965, p. 11-15.

Note.-1964 to 1966, Current Population Reports; Population Estimates, Series P-25, No. 385, February 14, 1968, p. 11-16.

Note.-1967 to 1968, Current Population Reports; Population Estimates and Projections, Series P-25, No. 441, March 19, 1970, p. 12-15.

The total population estimates (Table 1) reflect an annual increase population trend for all age groups with the exception of the 35 to 44 age group. This particular age group shows a steady decline population trend.

Table 2 compares the general population of the United States with the number of resident patients in state hospitals over an eight year period, 1961 to 1968 (U.S. Census, 1965, 1968, and 1970 and NIMH, 1970).

Table 2

ANNUAL ESTIMATES OF THE TOTAL POPULATION AND RESIDENT PATIENTS IN STATE HOSPITALS FOR ALL AGES IN THE U.S. 1961 to 1968

Year	General Population	Resident Patient Population
1961	183,756,000	527,456
1962	186,656,000	515,640
1963	189,417,000	504,604
1964	192,120,000	490,449
1965	194,592,000	475,202
1966	196,920,000	452,089
1967	199,188,000	426,309
1968	201,166,000	399,152

Table 2 indicates that while an increasing population trend exists for the general population, a marked decreasing trend is evident for the resident patient population in state hospitals in the U.S. The reader should be aware that while the resident patient population is decreasing, state hospitals in general are serving more patients within a shorter length of time and these patients are not accounted for in this study.

Since the primary focus of this study is on the school age population, 5-24 years of age, Table 3 presents the resident patient population by special age groups, i.e., Under 15 and 15-24 years (NIMH, 1970).

Table 3

RESIDENT PATIENTS IN STATE HOSPITALS IN THE U.S.
BY SPECIAL AGE GROUPS
1961 to 1968

Year	All Ages	Under 15	15-24	Total (school age)
1961	521,456	4,782	22,574	27,356
1962	515,640	4,860	23,485	28,345
1963	504,604	5,264	24,899	30,163
1964	490,449	5,118	26,369	31,487
1965	475,202	6,134	27,913	34,047
1966	452,089	6,289	27,280	33,569
1967	426,309	6,579	25,655	32,234
1968	399,152	6,365	25,315	31,680

Table 3 indicates the resident patient population is decreasing approximately 24.3% for all ages while the under 15 age group shows a 24.9% increase and the age group 15-24 reflects a 10.02% increase.

A closer inspection of the general population compared to the resident patient population in state hospitals in the U.S. for "school age" population is presented in Table 4. Despite the increase in school age admissions, patients under 24 years of age still comprise less than 8% of the total institutional population.

Table 4

PERCENT INCREASE OR DECREASE IN THE GENERAL AND
STATE MENTAL HOSPITAL POPULATION, U.S., BY AGE
1961 to 1968

Year	All Ages	Under 15	15-24	Name of Prescribed Population
1961	+8.7%	+3.4%	+33.6%	General Population
to				
1968	-24.3%	+24.9%	+10.1%	Resident Patient Population

The general population for all ages in the U.S. increased 8.7% from 1961 to 1968 while the resident patient population in State Hospitals decreased by 24.3%. However, for the age group, Under 15, an increase of 3.4% is viewed for the general population and a marked 24.9% increase is seen for the resident population. A 33.6% increase ish shown for the 15-24 age group in the general population and an increase of 10.1% for resident patients.

Similar data as was viewed in Table 1 regarding an age delination for the general population in the State of Kansas was not available for either 1961 or 1968. However, total general population estimates and the number of resident patients in State Hospitals are presented in Table 5 (Kansas Population Estimates, 1965 and 1970 and Kansas - Year End Reports, 1961-1968).

Table 5

ANNUAL ESTIMATES OF THE TOTAL POPULATION AND RESIDENT PATIENTS IN STATE HOSPITALS, ALL AGES, IN KANSAS
1961 to 1968

Year	General Population	Resident Population
1961	2,146,154	3,310
1962	2,165,009	3,179
1963	2,172,296	2,966
1964	2,180,533	2,801
1965	2,197,815	2,622
1966	2,220,362	2,432
1967	2,236,750	2,386
1968	2,265,170	2,101

An increase general population trend and a decreasing trend in residential patient population is seen for the State of Kansas. The population trends in Kansas are similar to the national population

trends presented in Table 2. A graphic comparison of the general population for the U.S. and Kansas as viewed in Figure 2 and Figure 3 depicts graphically the comparison between the resident populations.

It is interesting to note that Table 6 indicates a greater proportion of Kansans are institutionalized as compared to national trends. The questions which the reader might ask are: "Does Kansas have a higher incidence of mental illness?" or "Does Kansas provide a better mental health service to its general population?"

Table 6

COMPARISON BETWEEN THE PROPORTION OF HOSPITALIZED RESIDENT POPULATION (ALL AGES) FOR U.S. AND KANSAS FOR THE YEARS 1961 TO 1968

Year	U.S. Resident Population	% of General Population	Kansas Resident Population	% of General Population
1961	521,456	.03%	3,310	.15%
to				
1968	399,152	.02%	2,101	.09%

Thus far the data has reflected for both the U.S. and Kansas that the general population is increasing while the resident patient population is decreasing. A further delineation of the number of resident patients in state hospitals in Kansas by age groups, "under 15 and 15-24" (Kansas - Year End Reports, 1961-1968), is presented in Table 7.

FIGURE 2

TOTAL POPULATION OF THE U.S. AND KANSAS, 1961-68

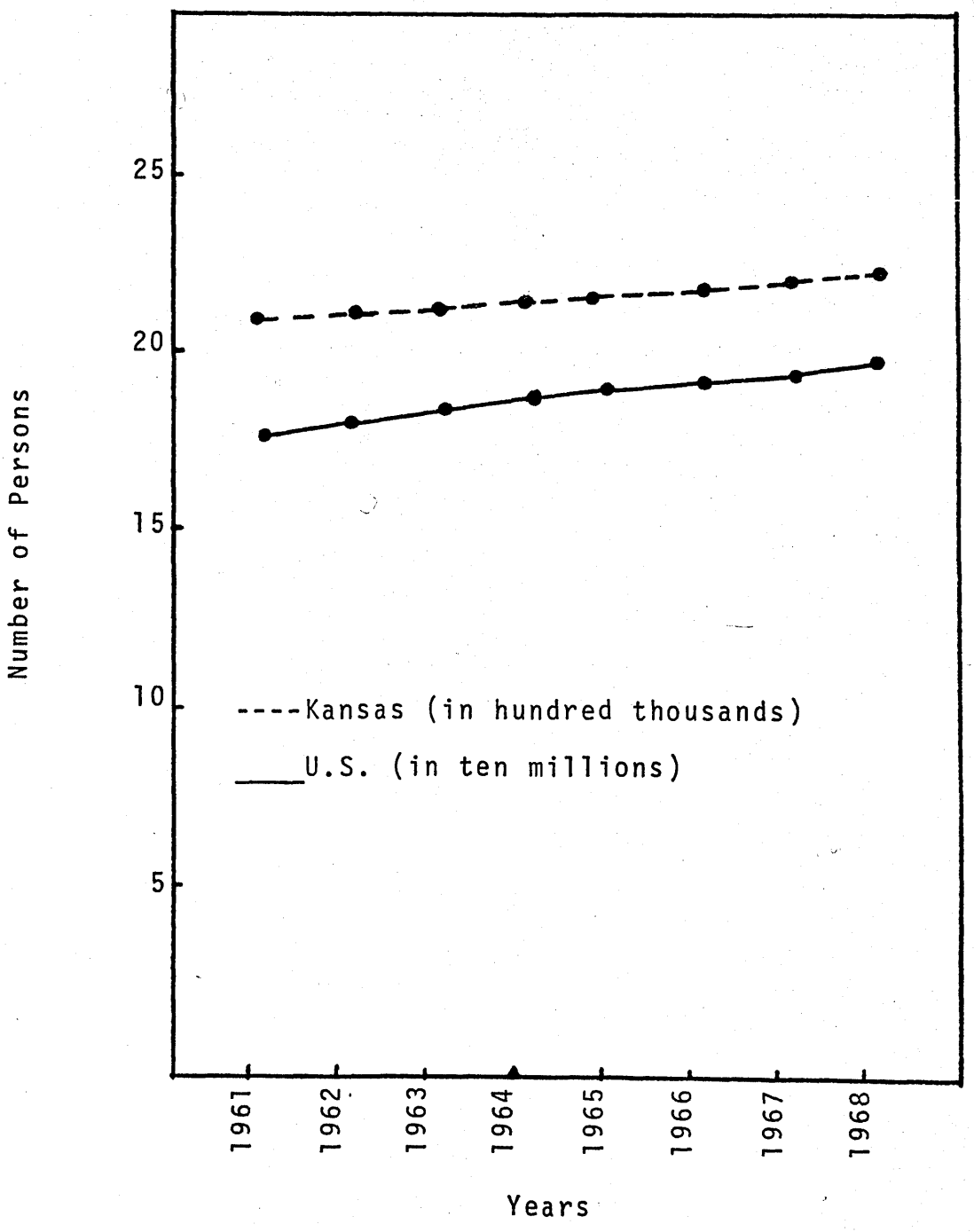


FIGURE 3

TOTAL RESIDENT PATIENT POPULATION IN STATE AND COUNTY MENTAL HOSPITALS, U.S. AND KANSAS, 1961-68

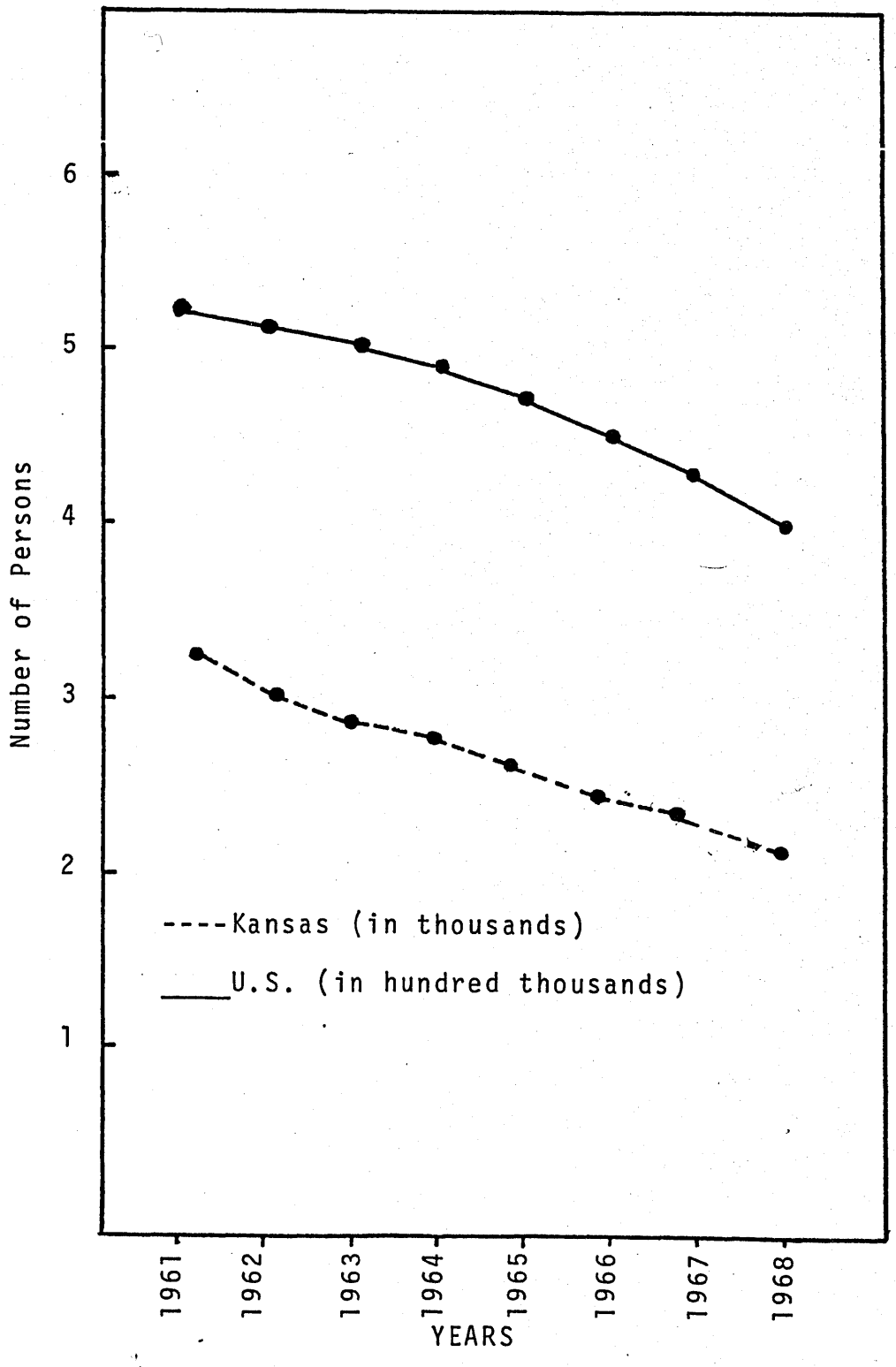


Table 7

NUMBER OF RESIDENT PATIENTS IN STATE HOSPITALS IN KANSAS
BY AGE GROUPS "UNDER 15 and 15-24
1961 to 1968

Year	Total All Ages	Under 15	15-24	School Age
1961	3,310	48	325	373
1962	3,179	45	324	369
1963	2,966	50	352	402
1964	2,801	51	388	439
1965	2,622	48	414	462
1966	2,432	54	434	488
1967	2,386	61	477	538
1968	2,101	72	465	537

Table 7 indicates that while the total residential population is decreasing, a marked increase is evident for both age sub-groups, Under 15 and 15-24.

Figure 4 compares the proportion of "Under 15" and "15-24" resident patients to the total resident population for both the U.S. and Kansas.

Table 8 shows a comparison between the proportion of hospitalized resident patients 24 years or less for both the United States and Kansas.

Table 8

COMPARISON BETWEEN THE PROPORTION OF HOSPITALIZED RESIDENT POPULATION, 24 YEARS OF AGE OR LESS, FOR THE U.S. AND KANSAS
1961 TO 1968

Year	Resident Population All Ages		Resident Population 24 Years or Less		Percent of Resident Population 24 Years or Less	
	U.S.	Kansas	U.S.	Kansas	U.S.	Kansas
1961	527,456	3,310	27,356	373	5.18	11.26
1968	399,152	2,101	31,680	537	7.93	25.55

FIGURE 4

PERCENT OF TOTAL RESIDENT PATIENT POPULATION, BY AGE: UNDER 15, 15-24, IN MENTAL HOSPITALS IN U.S. AND KANSAS 1961-1968

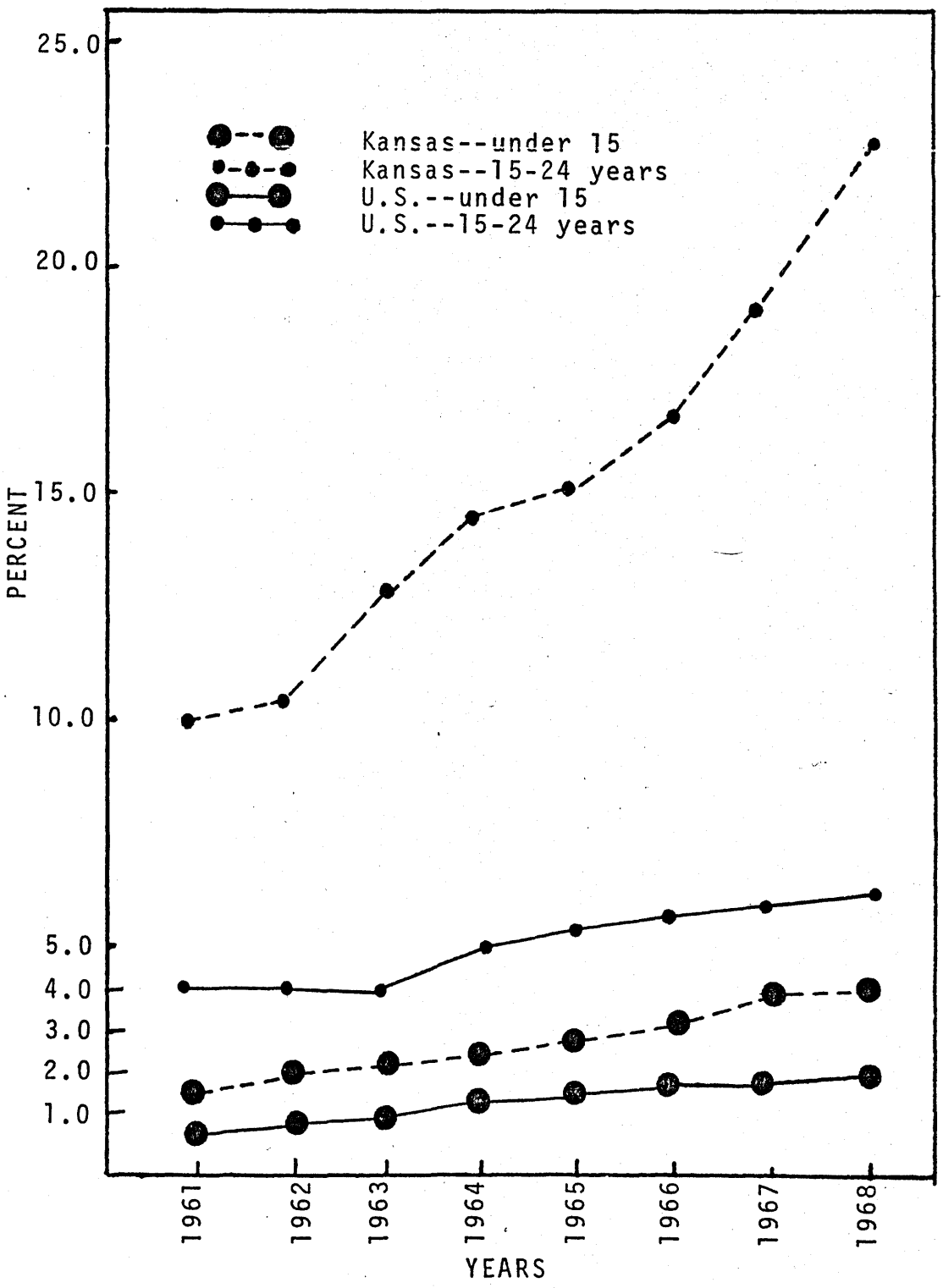


Table 8 reflects a marked difference between the percent of resident patients 24 years of age or younger in state hospitals in Kansas when compared to the U.S. state hospitals.

Table 9 reflects the number of male and female resident patients (all ages) in state hospitals for the years 1961 through 1968 in the U.S. and Kansas (NIMH, 1970 and Kansas - Year End Reports, 1961-1968).

Table 9

NUMBER OF RESIDENT PATIENTS, BY SEX, IN STATE MENTAL HOSPITALS, U.S. AND KANSAS (ALL AGES)
1961 to 1968

Year	U.S. Both	U.S. Male	U.S. Female	Kansas Both	Kansas Male	Kansas Female
1961	527,456	259,079	268,377	3,310	1,711	1,599
1962	515,640	253,672	261,968	3,179	1,622	1,557
1963	504,604	248,364	256,240	2,966	1,511	1,455
1964	490,449	241,634	248,815	2,801	1,434	1,367
1965	475,202	233,958	241,244	2,622	1,304	1,318
1966	452,089	222,190	229,899	2,432	1,234	1,198
1967	426,309	211,415	214,849	2,386	1,217	1,169
1968	399,152	199,517	199,635	2,101	1,132	969

The proportion of male to female resident patients for all ages in state mental hospitals in Kansas and the U.S. for the years 1961 through 1968 are presented in Table 10.

Table 10

PERCENT OF THE TOTAL RESIDENT PATIENT POPULATION (ALL AGES) BY SEX FOR BOTH THE U.S. AND KANSAS 1961 to 1968

Year	U.S. Percent Male	U.S. Percent Female	Kansas Percent Male	Kansas Percent Female
1961	49.12	50.88	51.69	48.31
1962	49.20	50.80	51.02	48.98
1963	49.22	50.78	50.94	49.06
1964	49.27	50.73	51.20	48.80
1965	49.23	50.77	49.73	50.27
1966	49.15	50.85	50.74	49.26
1967	49.59	50.41	50.94	49.06
1968	49.99	50.01	53.87	46.12

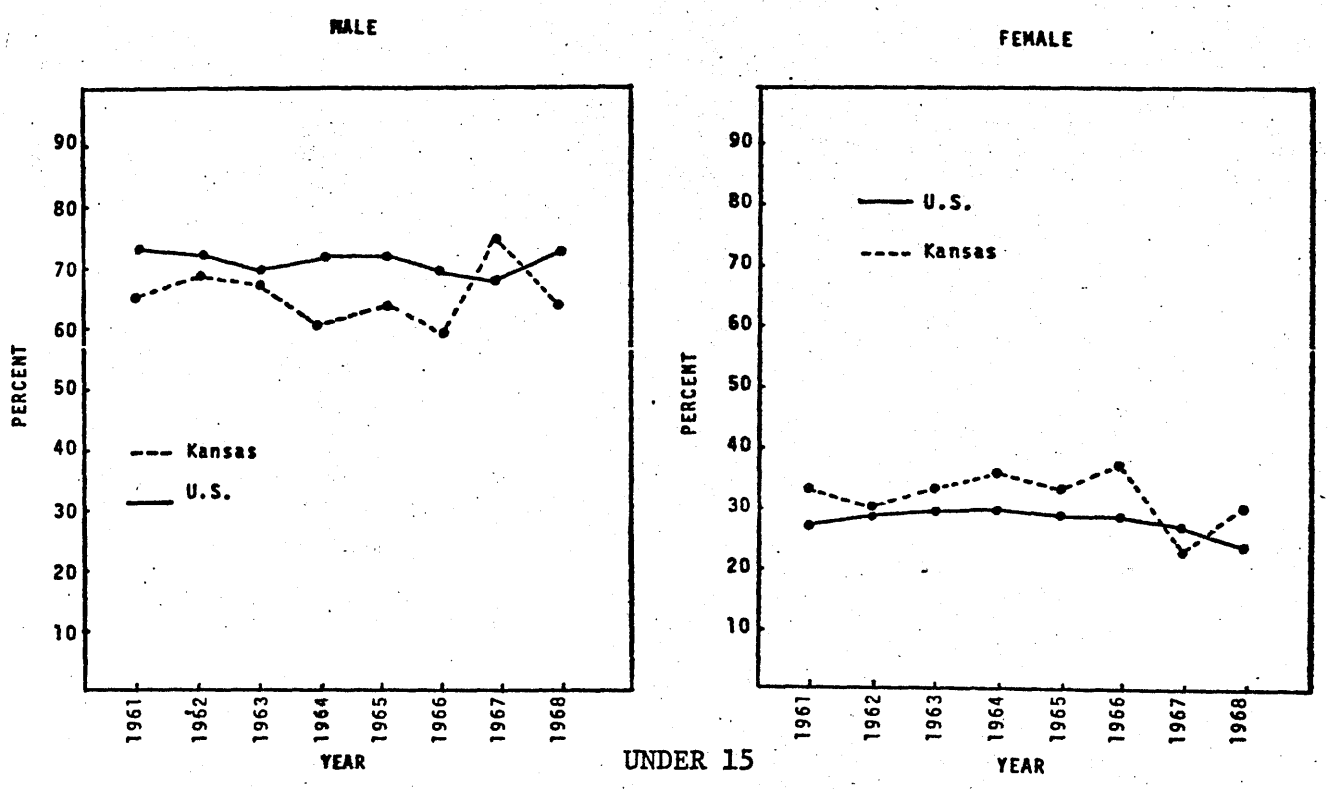
Table 10 indicates that just as many males as females (all ages) are resident patients in both the U.S. and Kansas state hospitals. However, does a similar male to female ratio exist for the school age resident populations? Table 11 compares the male to female ratio for the total resident population (all ages) to the school age resident population. A graphic presentation of the proportion of male and female resident patients under 15 and 15-24 years for both the U.S. and Kansas is viewed in Figure 5.

Table 11 indicates that over an eight year period, 1961 to 1968, for the total resident patient population, approximately 1 male to 1 female ratio exists for both the U.S. and Kansas; while the "school age" resident patient population reflects for the U.S. a 7 male to 3 female ratio and for Kansas, approximately a 6 male to 4 female ratio.

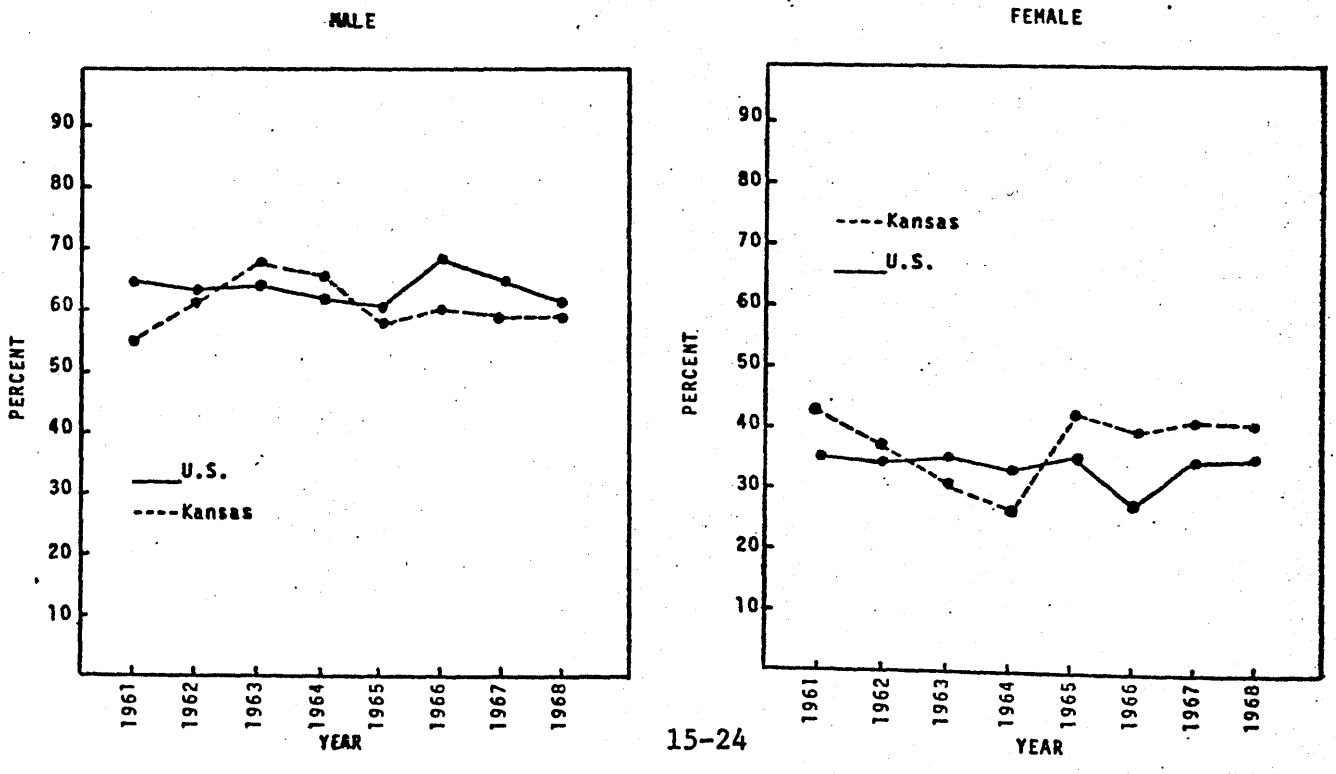
Table 12 compares the percent of male and female hospitalized resident patient population under 24 years of age for the U.S. and Kansas for the years 1961 and 1968.

FIGURE 5

PROPORTION OF MALE AND FEMALE RESIDENT PATIENTS UNDER 15 AND 15-24 FOR BOTH U.S. AND KANSAS, 1961-1968



UNDER 15



15-24

TABLE 11

PROPORTION OF MALE AND FEMALE RESIDENT PATIENTS FOR ALL AGES, UNDER 15, AND 15-24 FOR BOTH U.S. AND KANSAS, 1961-1968

Year		UNITED STATES						KANSAS					
		Total Resident Population		Under 15 Years		15-24 Years		Total Resident Population		Under 15 Years		15-24 Years	
	Sex	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
1961		49.12	50.88	72.42	27.58	64.21	35.79	51.73	48.27	68.75	31.25	58.93	41.07
1962		49.20	50.80	71.77	28.23	63.92	36.08	51.02	48.88	71.11	28.89	62.35	37.65
1963		49.22	50.78	72.09	27.91	64.18	35.82	50.94	49.06	70.00	30.00	67.05	32.95
1964		49.27	50.73	70.83	29.17	64.14	35.86	51.20	48.80	64.71	35.29	66.49	33.51
1965		49.23	50.77	72.46	27.54	63.70	36.30	49.73	50.27	67.35	32.65	60.14	39.86
1966		49.15	50.85	71.54	28.46	70.85	29.15	50.74	49.26	64.81	35.19	63.36	36.64
1967		49.59	50.51	71.99	28.01	64.51	35.49	50.94	49.06	75.41	24.59	61.64	38.36
1968		49.99	50.01	73.21	26.79	64.79	35.21	53.66	46.34	65.28	34.72	62.15	37.85

Table 12

COMPARISON BETWEEN THE PROPORTION OF MALE AND FEMALE RESIDENT PATIENTS UNDER 24 YEARS OF AGE FOR THE U.S. AND KANSAS FOR THE YEARS 1961 AND 1968

Year	Both	Male	% Male	Female	% Female
			U.S.		
1961	27,356	17,957	65.64	9,399	34.36
1968	31,680	21,061	66.48	10,619	33.52
			KANSAS		
1961	373	231	61.93	142	38.07
1968	537	336	62.56	201	37.44

The male-female ratio for 24 years or younger resident patients for both the U.S. and Kansas are approximately similar (6+ male to 3+ female).

The number of resident patients classified into one of the diagnostic categories used by state mental hospitals in the U.S. and Kansas is presented in Tables 13 and 14 (Kansas - Year End Reports, 1961-1968).

Tables 13 and 14 reveal that the largest diagnostic category, all ages, for both the U.S. and Kansas, is Psychotic Disorders. Acute and Chronic Brain Syndromes appears to be the second most frequent category for resident patients in the U.S. and Kansas. Personality Disorders is the third largest for the Kansas resident patients, while Mental Deficiency is third for the U.S. resident population. Figures on Transient Situational Personality Disorders show a marked increase in Kansas, while on a national scale, a slight increase is viewed. The classification, Neurotic Disorders, is the fourth largest nationally and the fifth largest for the state of Kansas.

TABLE 13

NUMBER OF RESIDENT PATIENTS IN EACH DIAGNOSTIC CATEGORY IN STATE MENTAL HOSPITALS, ALL AGES, U.S. AND KANSAS (1961-1968)

Year	Mental Deficiency		Acute-Chronic Brain Syn.		Psychotic Disorders		Psycho-Neurotic Disorders		Transient Situational Personality		Unlisted Diagnoses		Personality		Total	
	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.
1961	226	44,465	682	90,147	2,018	314,894	129	6,962	47	2,743	5	(58,428)	203	9,817	3,310	*469,028
1962	217	42,850	651	84,745	1,934	308,943	136	7,064	44	3,042	3	(58,951)	194	10,045	3,179	456,689
1963	189	42,084	591	80,118	1,752	301,398	150	7,720	49	3,381	1	(58,585)	234	11,318	2,966	446,019
1964	153	41,345	522	76,733	1,663	291,412	165	7,945	53	3,482	1	(57,163)	244	12,369	2,801	433,286
1965	134	39,727	514	73,504	1,549	278,194	160	7,841	50	3,991	0	(60,468)	215	11,477	2,622	414,734
1966	119	37,440	470	68,259	1,426	261,448	126	8,163	58	3,763	0	(61,451)	233	11,565	2,432	390,638
1967	116	35,950	447	63,593	1,373	244,352	134	7,636	73	3,828	1	(70,950)	242	10,901	2,386	355,359
1968	96	33,994	373	58,252	1,166	226,363	114	7,483	93	4,038	1	(57,585)	258	11,437	2,101	341,567

*excluding unlisted diagnosis

TABLE 14

A COMPARISON OF THE PERCENT DISTRIBUTION, BY DIAGNOSTIC CATEGORY, OF RESIDENT PATIENTS, ALL AGES, U.S. AND KANSAS (1961-1968)

Year	Mental Deficiency		Acute-Chronic Brain Syn.		Psychotic Disorders		Psycho-Neurotic Disorders		Transient Situational Personality		Personality Disorders	
	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.
1961	9.48	6.82	19.21	20.60	67.13	60.96	1.48	3.89	0.58	1.41	2.09	6.13
1962	9.38	6.82	18.55	20.47	67.64	60.83	1.54	4.27	0.66	1.38	2.19	6.10
1963	9.43	6.37	17.96	19.92	67.57	59.06	1.73	5.05	0.75	1.65	2.53	7.88
1964	9.54	5.46	17.70	18.63	67.25	59.37	1.83	5.89	0.80	1.89	2.85	8.71
1965	9.57	5.11	17.72	19.60	67.07	59.04	1.89	6.10	0.96	1.90	2.76	8.19
1966	9.58	4.89	17.47	19.32	66.92	58.63	2.08	5.18	0.96	2.38	2.96	9.58
1967	10.11	4.86	17.89	18.73	68.76	56.03	2.14	5.61	1.07	3.05	3.06	10.14
1968	9.95	4.56	17.05	17.75	66.27	55.49	2.19	5.42	1.18	4.42	3.34	12.27

Similar data relating to the number and percent of resident patients in state mental hospitals for the U.S. and Kansas, presented priorly, is viewed in the following tables, i.e., Tables 15 and 16, for the school age (24 years and younger) resident population for both the U.S. and Kansas. To facilitate the reader, these tables will be discussed here.

According to Table 15, the most frequent diagnostic category used for school age residents in the U.S. is Psychotic Disorders followed by Mental Deficiency, Personality Disorders, Transient Situational Personality Disorders, Psycho-Neurotic Disorders, and Acute and Chronic Brain Syndromes.

A further delineation of the distribution or percent and the number of school age residents by diagnostic categories in state mental hospitals in Kansas for the years 1961 through 1968 is presented in Table 16. According to Table 16, the following order of frequency of diagnostic categories for school age resident patients in Kansas: Psychotic Disorders, Personality Disorders, Transient Situational Personality Disorders, Acute-Chronic Brain Syndromes, Psycho-Neurotic Disorders, and lastly, Mental Deficiency.

In addition, Table 16 reveals that, for the year 1968, approximately 50% of all school age resident patients for both the U.S. and Kansas are classified as Psychotic. The U.S. school age population shows about 4 times more Mentally Deficient resident patients than does Kansas. Kansas shows some 3% more resident patients of school age with Personality Disorders, 2% more Transient Situational Personality Disorders, 2% more Psycho-Neurotic Disorders and some 13 times as many school age resident patients diagnosed as having Acute-Chronic Brain Syndrome Disorders.

TABLE 15

NUMBER OF SCHOOL AGE, 24 YEARS AND UNDER, RESIDENT PATIENTS, BY DIAGNOSTIC CATEGORY IN U.S. AND KANSAS (1961-1968)

Year	Mental Deficiency		Acute-Chronic Brain Syn.		Psychotic Disorders		Psycho-Neurotic Disorders		Transient Situational Personality		Unlisted Diagnoses		Personality		*Total School Age Population	
	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.
1961	4,508	6	77	33	12,973	173	676	40	2,252	36	(4,094)	3	2,776	82	23,262	373
1962	4,010	16	76	30	13,780	174	693	34	2,505	31	(4,328)	3	2,953	81	24,017	369
1963	4,073	10	71	35	14,221	186	816	36	2,793	40	(4,610)	0	3,579	95	25,553	402
1964	5,232	14	105	36	14,912	216	944	36	2,769	42	(3,426)	0	4,099	95	28,061	439
1965	4,849	19	118	38	15,560	231	905	53	3,310	38	(5,319)	0	3,986	83	28,728	462
1966	4,637	20	100	41	15,190	253	1,019	27	3,152	45	(5,557)	0	3,914	102	28,012	488
1967	4,531	29	105	34	13,895	286	992	31	3,264	61	(5,732)	0	3,715	97	26,502	538
1968	4,664	21	125	39	13,274	271	1,136	32	3,363	75	(3,548)	0	4,434	99	28,132	537

*Total excludes unlisted diagnostic category

TABLE 16

A COMPARISON OF THE PERCENT OF SCHOOL AGE, 24 YEARS OR LESS, RESIDENT PATIENTS IN THE U.S. AND KANSAS BY DIAGNOSTIC CATEGORY (1961-1968)

Year	Mental Deficiency		Acute-Chronic Brain Syn.		Psychotic Disorders		Psycho-Neurotic Disorders		Transient Situational Personality		Personality Disorders	
	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.	U.S.	Kans.
1961	19.37	1.60	0.33	8.84	55.76	46.38	2.90	10.72	9.68	9.65	11.93	21.98
1962	16.69	4.33	0.31	8.13	57.37	47.15	2.88	9.21	10.43	8.40	12.29	21.95
1963	15.93	2.48	0.27	8.70	55.65	46.26	3.19	8.95	10.93	9.95	14.00	23.63
1964	18.64	3.18	0.37	8.20	53.14	49.20	3.36	8.20	9.86	9.56	14.60	21.64
1965	16.87	4.11	0.41	8.22	54.16	50.00	3.15	11.47	11.52	8.22	13.87	17.96
1966	16.55	4.09	0.35	8.40	54.22	51.84	3.63	5.53	11.25	9.22	13.97	20.90
1967	17.09	5.39	0.39	6.31	52.43	53.15	3.74	5.76	12.31	11.33	14.01	18.02
1968	16.57	3.91	0.44	7.26	47.18	50.46	4.03	5.95	11.95	13.96	15.76	18.43

TABLE 17

RANKING OF THE DIAGNOSTIC CATEGORIES FROM MOST FREQUENT TO LEAST FREQUENT AS USED FOR THE SCHOOL AGE RESIDENT PATIENT POPULATION IN U.S. AND KANSAS OVER AN EIGHT YEAR PERIOD (1961-1968)

	U.S.	Kansas
1.	Psychotic Disorders	Psychotic Disorders
2.	Mental Deficiency	Personality Disorders
3.	Personality Disorders	Transient Situational Personality
4.	Transient Situational Personality	Acute-Chronic Brain Syndrome
5.	Psycho-Neurotic Disorders	Psycho-Neurotic Disorders
6.	Acute-Chronic Brain Syndrome	Mental Deficiency

To assist the reader, Table 17 has been added which ranks the diagnostic categories from most frequent to least frequent for both the U.S. and Kansas (1 - most frequent, 6 - least frequent).

Summary (Phase I)

Similarities between Kansas and the United States:

All Ages

1. Increase in the general population.
2. Decrease in the total resident population for the years 1961 to 1968.
3. The total resident population is decreasing.
4. Male to female ratio of resident patients (all ages) is 1:1.
5. The largest single diagnostic category is Psychotic Disorders (all ages).
6. Approximately 17% to 18% of all resident patients (all

ages) in Kansas and the U.S. are diagnosed as Acute-Chronic Brain Syndrome.

School Age

1. Approximately a 6+ to 3+ male-female ratio exists for school age resident patients.
2. The largest single diagnostic category is Psychotic Disorders (school age).
3. Psycho-Neurotic Disorders is the fifth most frequent diagnostic category for both the U.S. and Kansas.
4. The school age resident patient population is increasing.

Differences between Kansas and the United States:

All Ages

1. A greater proportion of the general population in Kansas are resident patients in state mental hospitals (Table 6).
2. For 1968, the resident patients (all ages) in Kansas had about 10% less resident patients classified as Psychotic Disorders than nationally.
3. The third largest category in 1968 for the Kansas resident population (all ages) was Personality Disorders, while for the U.S. it was Mental Deficiency.
4. Four times more resident patients (all ages) are diagnosed as Personality Disorders than nationally in 1968.
5. Nationally, about twice as many resident patients (all ages) are classified as Mentally Deficient than in Kansas for the year 1968.

6. Approximately 2 1/2 times as many resident patients (all ages) in Kansas are classified as having Psycho-Neurotic Disorders than nationally in 1968.

School Age

1. In 1961, Kansas had about twice as many school age resident patients than the U.S. as an average.
2. In 1968, Kansas had approximately 3 1/2 times as many school age resident patients in state mental hospitals than the nation.
3. The sub-age group, 15-24, is about 5 times larger for resident patients in Kansas than nationally.
4. Personality Disorders is the second largest diagnostic category for Kansas with 18.4% of the resident school population in this area, while Personality Disorders is ranked third nationally with about 16.0% in this category.
5. Kansas has approximately 2% more school age resident patients classified as Transient Situational Personality Disorders and 12.0% nationally. This classification ranked third in Kansas and fourth nationally.
6. Kansas school age resident patient population are classified as Acute-Chronic Brain Syndrome about 18 times more often than nationally. Acute-Chronic Brain Syndrome ranks fourth in Kansas and sixth nationally.
7. Kansas has about 4 1/2 times less resident patients classified as Mentally Deficient than the U.S. Mental Deficiency was the second most frequent diagnostic category nationally and sixth in Kansas.

Phase II

The data presented thus far in Phase I has dealt with comparisons between the resident hospital population and the general population for both the United States and Kansas.

The second section, Phase II of this study, is a more in depth account of the hospitalized youths in Kansas, 5 through 19 years of age, on selected characteristics for the year 1970.

The particular questions and hypotheses being investigated in Phase II are:

Hypotheses

There are no significant differences between the county of residence for a patient and hospital placement as measured by the Chi-Square test for difference.

There are no significant differences among diagnostic categories and hospital placement as measured by the Chi-Square test for difference.

There are no significant differences between the sex ratio of males to females among the three state hospitals as measured by the Chi-Square test for difference.

Questions

Is age instrumental in admitting school age (5-19 years) resident patients to a particular state hospital in Kansas?

At what age do most school age (5-19 years) resident patients generally get admitted to state mental hospitals in Kansas?

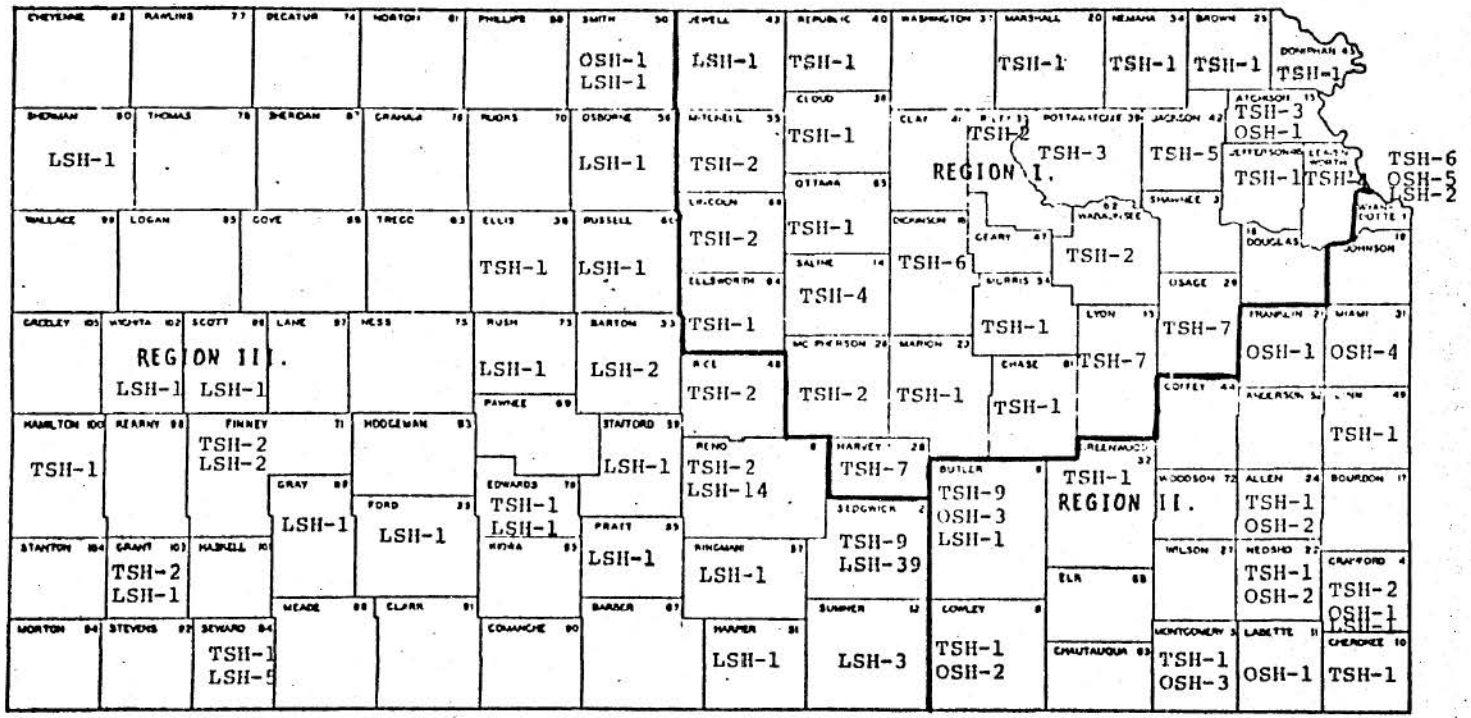
Is hospital admission influenced by the existence of special classes for the emotionally disturbed in the community?

Figure 6 illustrates the division of the state of Kansas into hospital regions by county. Topeka State Hospital (TSH) services Region I, Osawatomie State Hospital (OSH) services Region II, and Larned State Hospital (LSH) services Region III. The various numbers following each hospital abbreviation reflect the number of school age (5-19 years) resident patients from that county admitted to that particular hospital.

FIGURE 6

KANSAS STATE HOSPITALS

BREAKDOWN BY HOSPITAL SECTIONS



Region I. Topeka State Hospital (TSH)

Region II. Osawatomie State Hospital (OSH)

Region III. Larned State Hospital (LSH)

Before investigating the question, "Does the county of residence for a school age resident patient indicate to what hospital he is to be admitted?" a close inspection of the age upon admission (Table 18) should be viewed first.

According to Table 18, the age range for each hospital is: TSH, 6 to 19 years; OSH, 12 to 19 years; and LSH, 10 to 19 years. The mean age upon admission for each hospital is: TSH, 13.5 years; OSH, 16.1 years; and LSH, 15.5 years. TSH had 33 or 15.8 percent of the school

TABLE 18

AGE UPON ADMISSION BY HOSPITAL AND PROPORTION IN EACH AGE LEVEL

	State Hospitals					
Age	TSH		OSH		LSH	
	f	%	f	%	f	%
6	2	0.9				
7	4	1.9				
8	10	4.8				
9	9	4.3				
10	8	3.8			1	1.1
11	14	8.9			1	1.1
12	15	7.1	2	4.5	5	5.4
13	24	11.5	2	4.5	5	5.4
14	27	12.9	3	6.8	14	15.2
15	28	13.4	7	15.9	19	20.7
16	33	15.8	9	20.5	16	17.4
17	15	7.2	13	29.5	17	18.5
18	17	8.1	4	9.1	11	11.9
19	3	1.4	4	9.1	3	3.3
	N=209 fx=2821 X=13.50 Md=13.59 Mode=16 Range=6-19		N=44 fx=710 X=16.14 Md=16.11 Mode=17 Range=12-19		N=92 fx=1427 X=15.51 Md=16.35 Mode=15 Range=10-19	

age patients in the ten year or younger age group. Neither LSH nor OSH served any school age patients in this age group. The reader should be reminded at this point that TSH is the only state mental hospital providing services for the extremely young mentally ill child. Another reminder for later reference is that Figure 6 showed that 20 school age children from Region III are hospitalized in TSH. Five of these 20 are located in TSH because they were less than 11 years of age upon admission.

Since mental health services are not provided at LSH and OSH for young resident patients, ten years and less, they were omitted from certain comparisons.

Table 19 shows a numerical composite of the number and percent of school age (omitting children 10 years and less) resident patients admitted to a particular hospital and the region from which the patient resided before hospital admission.

Table 19

NUMBER AND PERCENT OF ACTIVE SCHOOL AGE (11-19 YEARS) PATIENTS ADMITTED TO TSH, OSH, AND LSH BY REGIONS, END OF YEAR, 1970

	(TSH) Region I		(OSH) Region II		(LSH) Region III	
Hospital	Number	%	Number	%	Number	%
TSH	141	92.78	19	29.23	15	15.95
OSH	2	1.31	42	64.61	0	0
LSH	9	5.92	4	6.15	79	84.04

Note.-County of residence for one patient from TSH was unlisted.
Note.-Total school age (11-19 years) for each state hospital... TSH (N=175), OSH (N=44), LSH (N=92).

Approximately 93% of all residents in Region I are hospitalized in TSH (the Region I hospital), 1% in OSH and 6% in LSH. In Region II (OSH region), 65% are is OSH, 29% in TSH, and 6% are patients in LSH. In Region III (LSH), 84% of all 11-19 year olds are residents of LSH and 16% are residents in TSH. TSH and LSH appear to be serving their school age (11-19 years) resident patients on a regional basis.

The data in Table 20 attempts to answer the question, "Does the county of residence for a patient indicate to what hospital he is to be admitted?" or another way of wording the same question, "Is the Kansas Plan working?" The assumption is made that if 90% of all resident patients (11-19 years) in a particular region are hospitalized in the designated hospital, then the Regional or Kansas Plan is working.

Table 20

CHI-SQUARE MEASURE OF DIFFERENCE BETWEEN HOSPITAL PLACEMENT AND REGION OF RESIDENCE, 1970

	TSH	OSH	LSH
Residence in Hospital Region	141 (157.5)	42 (37.8)	79 (71.1)

The Chi-Square analysis ($X^2 = 3.08$, df = 1) is not significant at the .01 level or condition, indicating that the "Kansas Plan" or a regional plan at the 90% level is in effect and would tend to reflect admission to a hospital within his county or hospital region.

The number and percent of school age resident patients in TSH, OSH, and LSH state hospitals by diagnostic categories or mental disorders is depicted in Table 21. The reader is also referred to Table 22 for a rank order of mental disorders by hospital.

TABLE 21

NUMBER AND PERCENT OF SCHOOL AGE (5-19 YEARS) RESIDENT PATIENTS BY HOSPITAL, MENTAL DISORDERS AND CODE NUMBER FOR 1970

List and Code of Mental Disorders		TSH No.	TSH %	OSH No.	OSH %	LSH No.	LSH %
I	Mental Retardation (310-315)	6	2.87	5	11.36	9	9.78
II	Organic Brain Syndrome (A. 290-294) (B. 309-309.9)	4	1.91	0	0	1	1.08
III	Psychoses not attributed to Physical Conditions (295-298)	125	59.80	15	34.09	26	28.26
IV	Neuroses (300-300.9)	8	3.82	2	4.54	2	2.17
V	Personality Disorders (301-304)	27	12.91	4	9.09	8	8.69
VI	Psychophysiologic Disorders (305)	-		-		-	
VII	Special Symptoms (306)	-		-		-	
VIII	Transient Situational Disorders (307)	32	15.31	12	27.27	35	38.04
IX	Behavior Disorders of Childhood And Adolescence (308)	5	2.39	6	13.63	10	10.86
X	Conditions without Psychiatric Disorder and nonspecific conditions (316-318)	2	0.95	0	0	1	1.08
XI	Non-Diagnotic Terms For Administration	-		-		-	
	TOTAL	209	99.98	44	99.98	92	99.98

TABLE 22

RANK ORDER AND PERCENT OF MENTAL DISORDERS OF SCHOOL AGE (5-19 YEARS) RESIDENT PATIENTS, BY HOSPITAL, 1970

TSH		OSH		LSH	
1. Psychotic Disorders	(59.8)	1. Psychotic Disorders	(34.1)	1. Transient Situational Personality	(38.0)
2. Transient Situational Personality	(15.3)	2. Transient Situational Personality	(27.3)	2. Psychotic Disorders	(28.3)
3. Personality Disorders	(12.9)	3. Behavior Disorders	(13.6)	3. Behavior Disorders	(10.9)
4. Psycho-Neurotic Disorders	(3.8)	4. Mental Deficiency	(11.4)	4. Mental Deficiency	(9.8)
5. Mental Deficiency	(2.9)	5. Personality Disorders	(9.1)	5. Personality Disorders	(8.7)
6. Behavior Disorders	(2.4)	6. Psycho-Neurotic Disorders	(4.5)	6. Psycho-Neurotic Disorders	(2.2)
7. Acute-Chronic Brain Syndrome	(1.9)	7- Acute-Chronic Brain Syndrome	(0)	7- Acute-Chronic Brain Syndrome	(1.1)
8. Without Disorders	(1.0)	7- Without Disorders	(0)	7- Without Disorders	(1.1)
	100%		100%		100.1%

As reflected in Tables 21 and 22, well over 60 percent of all school age resident patients are classified into two categories: Psychoses and Transient Situational Disturbances (TSH, 75.1%; OSH, 61.3%; LSH, 66.3%). It is interesting to note that LSH ranks Transient Situational Disturbances most frequent with 38.0 percent followed by Psychoses with 28.3 percent. While the other two hospitals rank Psychotic Disorders first (TSH, 59.8%; OSH, 34.1%) and Transient Situational Disturbances second (TSH, 15.3%; OSH, 27.3%), 23.2% of all school age resident patients classified as psychotic are less than 11 years of age. These younger resident patients account for the larger proportion of psychoses listed for TSH. In addition, 29 out of 33 resident patients ten years and younger are classified as having Psychoses. This would appear to reinforce the notion that the younger the child is in a state mental hospital, the more severe his diagnosis is likely to be.

To test for significant differences between the school age resident patient population (5-19 years) in the three hospitals when compared on diagnostic categories, the Chi-Square test for difference is utilized in Tables 23, 24 and 25.

Table 23 reflects a Chi-Square value of 9.86, df = 2, which is significant at the .01 level of significance. This value reflects that the two hospital samples, TSH and OSH are significantly different when compared to type of diagnosis or mental disorders.

The TSH sample had lower actual frequencies than expected in the three classification categories. OSH, on the other hand, showed a higher actual frequency than expected in the categories labeled "Transient Situational Disturbances" and "Others."

Table 24 shows a Chi-Square value of 1.53, df = 2, which is not significant at the .01 level. This level of significance reflects that there are no significant differences between the two hospitals, OSH and LSH, when the school age resident patients are compared on type of diagnosis or mental disorders.

Table 25 indicates a Chi-Square value of 29.35, df = 2, which is significant beyond the 0.01 level which reflects that the two hospitals school age resident patient populations are significantly different when compared to type of diagnosis.

In summary it appears that OSH and LSH school age resident patients are similar when compared on type of diagnosis. Both OSH and LSH school patients appear significantly different from the TSH population when compared on type of diagnosis or mental disorders for the 5-19 year old age group. However, Tables 26, 27 and 28 test for differences in diagnosis with age controlled by omitting the 5-10 age group in TSH.

Table 26, indicating a Chi-Square value of 5.94, df = 2, is not significant at the .01 level or condition. Therefore, it appears that TSH and OSH do not have significantly different school age (11-19 years) populations when compared to type of mental disorders. It is interesting to note that Table 23 which compared TSH and OSH (5-19 years) resident patients were found to differ on type of diagnosis, therefore age appears to be a definite factor in diagnostic classification.

Table 27, indicating a Chi-Square value of 1.53, df = 2, reflects no significant differences at the .01 level between OSH and TSH.

Table 28 shows a Chi-Square value of 15.62, df = 2, which is beyond the .01 condition, indicating a difference between TSH and LSH school

TABLE 23

CHI-SQUARE TEST FOR DIFFERENCES IN DIAGNOSIS (5-19 YEARS)
(TSH - OSH)

Hospital	Mental Disorders			
	Psychoses	Transient Situational	Others	Total
TSH	125 (115.64)	32 (36.34)	52 (56.99)	209
OSH	15 (24.35)	12 (7.65)	17 (12.00)	44
	140	44	69	253

* X^2=9.86

TABLE 24

CHI-SQUARE TEST FOR DIFFERENCES IN DIAGNOSIS (5-19 YEARS)
(OSH -LSH)

Hospital	Mental Disorders			
	Psychoses	Trans. Sit.	Others	Total
OSH	15 (13.26)	12 (15.20)	17 (15.53)	44
LSH	26 (27.73)	35 (31.79)	31 (32.47)	92
	41	47	48	136

X^2=1.53

TABLE 25

CHI-SQUARE TEST FOR DIFFERENCES IN DIAGNOSIS (5-19 YEARS)
(TSH - LSH)

Hospital	Mental Disorders			
	Psychoses	Trans. Sit.	Others	Total
TSH	125 (104.84)	32 (46.52)	52 (57.63)	209
LSH	26 (46.15)	35 (20.47)	31 (25.36)	92
	151	67	83	301

* X^2=29.32

Note *. - significant at the .01 level.

TABLE 26

CHI-SQUARE TEST FOR DIFFERENCES IN DIAGNOSIS (11-19 YEARS)
(TSH - OSH)

Hospital	Mental Disorders			
	Psychoses	Transient Situational	Others	Total
TSH	96 (88.8)	32 (34.4)	48 (52.0)	176
OSH	15 (22.2)	12 (8.8)	17 (13.0)	44
	111	43	65	220 X^2=5.94

TABLE 27

CHI-SQUARE TEST FOR DIFFERENCES IN DIAGNOSIS (11-19 YEARS)
(OSH - LSH)

Hospital	Mental Disorders			
	Psychoses	Transient Situational	Others	Total
OSH	15 (13.3)	12 (15.2)	17 (15.5)	44
LSH	26 (27.7)	35 (31.8)	31 (32.5)	92
	41	47	48	136 X^2=1.53

TABLE 28

CHI-SQUARE TEST FOR DIFFERENCES IN DIAGNOSIS (11-19 YEARS)
(TSH - LSH)

Hospital	Mental Disorders			
	Psychoses	Transient Situational	Others	Total
TSH	96 (80.1)	32 (44.0)	48 (51.9)	176
LSH	26 (41.9)	35 (23.0)	31 (27.1)	92
	122	67	79	268 * X^2=15.62

Note *. - significant at the .01 level.

age resident patients (11-19 years) concerning the classification of mental disorders.

It appears that OSH and TSH as well as OSH and LSH school age residents are very similar when compared on type of diagnosis or mental disorders.

Before the question relating to the ratio of male to female school age resident patients (5-19) in the three state hospitals is answered, additional background data is needed. This additional data regards the percent of school age children in the general population compared to the percent who are active patients in each of the three hospitals. According to the Comprehensive Educational Survey of Kansas, Vol. II, "The Elementary and Secondary Education Study," Kansas Legislative Council, Research Department, Topeka, Kansas (March, 1970), more than 502,000 school age children make up the general population in Kansas. This figure reflects that approximately 29 percent of all residents in Kansas fall into the 5 to 19 age group. Of this age group 51 percent are males and 49 percent are females. With this information available as well as the data presented in Table 18, the proportion of school age resident patients as it compares with the state data, is presented in Table 29.

The Comprehensive Educational Survey of Kansas mentioned previously indicated approximately 29 percent of the general population in Kansas are in the 5-19 age group. Table 29 indicates that only TSH seems to have a similar percentage of school age population hospitalized. OSH and LSH are far below this figure.

Table 29

PROPORTION OF SCHOOL AGE RESIDENT PATIENTS TO THE TOTAL RESIDENT POPULATION BY HOSPITAL, 1970

	Total Hospital Population	Resident Patients (5-19 yrs)	Percent of Total
TSH	705	209	29.64
OSH	453	44	9.71
LSH	662	92	13.89

Table 30 gives a breakdown as to the sex ratio of the school age resident populations by individual hospital.

Table 30

PROPORTION OF MALE TO FEMALE SCHOOL AGE (5-19 YEARS) RESIDENTS BY HOSPITAL

	Resident Population (5-19 years)	Males	%	Female	%
TSH	209	119	57	90	43
OSH	44	30	68	14	32
LSH	92	57	62	35	38

Topeka State Hospital (YSH) reflects a sex ratio similar to the general population (approximately a 1:1 ratio). Osawatomie depicts approximately a 7 to 3 ratio of males to females. Larned's (LSH) ratio of male to female is close to a 6 to 4 relationship. OSH and LSH male to female ratio is indicative of the findings nationally in Phase I of this study. Just a reminder to the reader that the ratio of male to

female resident patients is equal (1:1) as adults, but the ratio appears to increase markedly for resident patients in the 5-19 year age range.

Table 31 tests for differences in male to female placement by the Chi-Square test for differences between male and female residents in each hospital setting.

Table 31

CHI-SQUARE TEST FOR DIFFERENCES BETWEEN MALE AND FEMALE RESIDENTS (5-19 years) BY HOSPITAL, END OF YEAR, 1970

Hospital	Male	Female
TSH	119 (112.48)	90 (63.52)
OSH	30 (47.28)	14 (26.70)
LSH	57 (95.22)	35 (53.77)

$X^2 = 1.0$

The Chi-Square value of 1.00, df = 2, is not significant at the .01 level which indicates that the ratio of males to females does not differ significantly in the state mental hospitals in Kansas.

Appendix E lists the various programs for emotionally disturbed children in the public schools in the State of Kansas. The question being reviewed is, "Is there a significant difference between the number of school age resident patients coming from school districts with special classes or programs for the emotionally disturbed than from schools without programs?" The reader should be aware that age and diagnosis were not controlled for because this writer feels that the public has an obligation to provide an appropriate education for all

children. Therefore, Table 32 provides a description of the frequency and the proportion of all resident patients coming from schools with special classes and those coming from schools without special classes, by hospital, for those youngsters in the 5 to 19 age group.

Table 32

NUMBER AND PROPORTION OF SCHOOL AGE (5-19 years) COMING FROM PUBLIC SCHOOLS WITH AND WITHOUT SPECIAL CLASSES FOR THE EMOTIONALLY DISTURBED CHILD, BY HOSPITAL

	With Programs		Without Programs	
	(f)	(%)	(f)	(%)
TSH	91	44.4	114	55.6
OSH	17	39.5	26	60.5
LSH	No Data Available			

It appears that from the descriptive data in Table 32 that more TSH and OSH school age residents (5-19 years) come from school systems without special programs for the emotionally disturbed. The reader, however, must be aware that just because a school district had special programs does not necessarily indicate that the patient was a member of that program. A suggestion of establishing an individual information and tracking or follow-up system is needed so that more precise information and data may be collected and analyzed for a more complete description of the school age resident patients in each of the three state mental hospitals.

Summary

Age

The OSH and LSH school age population appear to be similar with respect to chronological age. The age range for both of these hospitals was 11 to 19 years. TSH, on the other hand, had approximately 84% in the 11 to 19 year age group, while 16% were in the 5 to 10 age range. This was expected since TSH is the only state mental hospital providing services at the present time to these young school age children. The most frequent age category (mode) was 16 years of age for TSH, 17 years for OSH and 15 years for LSH. Therefore it appears that the most critical or most frequent age range for school age resident patients might be around the mid-teens. This critical period was reinforced when looking at the Mean and Median scores, except for TSH whose young (5-10 years) resident population effect the mean scores. The Mean (X) and Median (Md) age upon admission were: TSH, $X = 13.5$, $Md = 13.6$; OSH, $X = 16.1$, $Md = 16.1$; LSH, $X = 15.5$, and $Md = 16.4$.

County of Residence

There appears to be no significant differences between the county of residence and the particular hospital which a school age patient is placed. This implies that the "Kansas Plan" or a regional plan at the 90% level is in effect and would tend to indicate that admission to a hospital is a function of county or hospital region of residence.

Diagnosis

Most of the school age (5-19 years) resident patients in the three state mental hospitals fell into two major diagnostic categories: Psychotic Disorders and Transient Situational Personality Disorders. When the diagnoses for the school age patients were compared between

hospitals, it was found that the school age (5-19) patients in TSH differed significantly from OSH and LSH. However, when age was controlled and only those patients 11 to 19 years of age were compared, only TSH and LSH differed significantly on diagnosis.

Male to Female Ratio

The male to female ratio for the patients in the age group 5 to 19 years was compared with similar ratios being evident for TSH and LSH. Both hospitals showed approximately a 6 male to 4 female ratio. OSH reflected approximately 7 males to every 3 females for its resident school age (5-19 years) population.

Public School Programs

A comparison was made between the number of school age (5-19) resident patients coming from public schools with and without special classes for the emotionally disturbed and hospital placement. A marked number of these school age patients came from public schools without special classes for the emotionally disturbed.

CHAPTER VI

Summary

Purpose of the Study

The principal objectives of this study were: (1) Phase I, to provide descriptive comparisons concerning youths under 24 years of age who were resident patients in state mental hospitals in Kansas and the United States on selected demographic characteristics (age, sex, and diagnosis); (2) Phase II, to provide an in depth account of the youths 5 to 19 years of age for the year 1970 on selected demographic characteristics of age, sex, diagnosis, and county of residence, as compared with hospital placement, i.e., Osawatomie, Topeka, or Larned.

Procedures

Through the cooperation of the Division of Institutional Management, Department of Social Welfare, Topeka, Kansas, hospital records, census data, Biennial Reports, End of Year Reports, reports to the National Institute for Mental Health, and computer printouts concerning resident patients in state mental hospitals were made available for investigation. These data have been presented in descriptive and comparative forms. The results have been reported under their respective Phases, Phase I and Phase II.

Phase I

All Ages

Kansas and the United States experienced a similar general population increase for the years 1961 to 1968. While the general population was increasing, the total resident patient population for all ages was decreasing. However, state hospitals are serving more people in a shorter

length of stay. Approximately 4 1/2 times more of the general population in Kansas were resident patients in state mental hospitals when compared to the number of resident patients from the general population in the United States. This larger percentage might reflect a more comprehensive mental service system for the State of Kansas than for other states.

The proportion of males and females (all ages) was equal (1 male to 1 female) for the general population in Kansas and the United States during the years 1961 to 1968. Over the same period of time, a similar proportion, 1 male to 1 female, existed for the total resident population in state mental hospitals in Kansas and the United States.

The largest single diagnostic category for the total resident population in Kansas and the United States was Psychotic Disorders followed by Acute-Chronic Brain Syndromes over the eight year period, 1961 to 1968. However, for the year 1968, approximately 10% fewer Kansas resident patients were classified as Psychotic than nationally and approximately the same percentage was classified in the Acute-Chronic Brain Syndrome category. The third largest diagnostic category in 1968 for the Kansas resident population (all ages) was Personality Disorders, while for the United States it was Mental Deficiency. Four times more resident patients were classified as Personality Disorders in Kansas than in the United States. Kansas also had approximately half as many residents diagnosed as Mentally Deficient than nationally. This might indicate that Kansas is providing a more adequate placement for these mentally deficient patients than state mental hospitals.

School Age

Unlike the resident populations for all ages, the school age

populations for both Kansas and the United States are markedly increasing over an eight year period from 1961 to 1968. The year 1961 showed Kansas as having proportionally twice as many school age residents than nationally and in 1968 proportionally 3 1/2 times as many. The sub-age group, 15 to 24 years, in state mental hospitals in Kansas was approximately 5 times larger than for the same age group nationally. It appears that Kansas might be one of the leaders in providing mental health services through the state mental hospitals for the school age population in the United States.

The male to female ratio for patients 24 years and younger in state mental hospitals was similar for both the United States and Kansas. A ratio existed of 6 males to every 3 females for both populations. This proportion is significantly different than the 1:1 sex ratio indicated previously for the general population and total resident patient population for both Kansas and the United States. This data appears to confirm that more males are hospitalized than females during the school age time of life but as age increases the ratio becomes more equalized for both male and female patients.

Approximately half of all the school age residents in state mental hospitals fall into the largest single diagnostic category of Psychotic Disorders. This same category was also the largest for resident patients of all ages for both Kansas and the United States. Personality Disorders was the second largest diagnostic category for school age residents in Kansas and was third largest nationally. Transient Situational Personality Disorders ranked third in frequency in Kansas and fourth nationally. Kansas school age resident patients are classified as Acute-Chronic Brain Syndrome (ranked fourth in Kansas and sixth

nationally) about 18 times more often than for school age residents in state mental hospitals nationally. Psycho-Neurotic Disorders was ranked fifth for both school age resident patient populations. In concluding, Kansas had approximately 4 1/2 times less resident patients classified as Mentally Deficient (ranked sixth in Kansas and second in the United States) than were classified nationally.

Phase II

Age

Topeka State Hospital (TSH) was the only state mental hospital in the State of Kansas which provided residential mental health services to children 5 to 10 years of age. Sixteen percent of the total school age (5-19 years) resident patients in TSH fell into this age range. The school age (5-19) resident patients in Larned State Hospital (LSH) and Osawatomie State Hospital (OSH) were similar when compared on age admitted. The age range for the school age resident patients for these two hospitals was 11 years to 19 years of age. The most frequent age for hospital placement appeared to be around the mid-teen years.

County of Residence

The county of residence of a school age patient did appear to indicate in which hospital he was placed when the hospitals were compared to each other. TSH, OSH, and LSH service approximately 90% of all school age residents coming from their respective regions. Therefore, it could be said that TSH, OSH, and LSH do have a regional approach (Kansas Plan) to serve the school age population in Kansas.

Male to Female Ratio

The proportion of male to female school age residents in the age range 5 to 19 years was similar for TSH and LSH. Both hospitals reflected

a ratio of 6 males to 4 females, while OSH had about 7 males to every 3 females. These ratios seemed to be consistent with the information found in Phase I.

Diagnoses

Psychotic Disorders and Transient Situational Personality Disorders were the two major diagnostic categories into which most of the school age (5-19 years) resident patients were classified. The school age resident patients in TSH who were in the age range 5-19 years differed significantly from OSH and LSH. But, when the 5-10 year olds were omitted from comparisons between TSH and the other hospitals, only TSH and LSH differed significantly. It was interesting to note that 29 of the 33 school age patients (5-10 years of age) in TSH were diagnosed as Psychotic. This might reinforce the concept that state mental hospitals only provide services to the severely mentally ill.

Public School Programs

Approximately 12% more school age residents (5-19 years) in TSH came from public schools without programs for the emotionally disturbed, and 21% more in OSH came from public schools without special programs. In total, 55.6% of TSH resident school age patients came from public schools without special classes for the emotionally disturbed child, and 60.5% from OSH. Similar data was not available for LSH. In conclusion, a larger number of school age resident patients came from public schools without special classes for the emotionally disturbed.

Recommendations

Descriptive and comparative data concerning the school age resident patients for both Kansas and the United States has been presented.

Since this data was only presented as a baseline of information, the following recommendations are offered:

1. The State Department of Social Welfare, Division of Hospital Management, should accept the responsibility for the initiation and maintenance of an information and tracking system specifically for school age hospitalized patients in state mental institutions in Kansas. Such a system could include information regarding: age, sex, diagnosis, county and city of residence, last school attended, educational level upon admission, educational level upon release, vocational interest and skills upon admission, vocational interest and skills upon release, special services available in the community, a list of significant contacts in the community, i.e., teachers, counselors, employers, doctors, etc. Follow-up or tracking information after release could provide hospital administrators with pertinent information for constructive program changes to meet the changing population needs.
2. The State Department of Social Welfare, Division of Hospital Management and the Comprehensive Mental Health Centers in conjunction with the Department of Education, Division of Special Education, should develop through a joint effort special programs in the public schools which could facilitate a complete mental health network or system for a continuum of mental health services to all school age children in the State of Kansas.
3. The State Department of Social Welfare, Division of Hospital Management should investigate the feasibility of establishing

mental health services for the very young (5-10 year olds) at OSH and LSH. At the present time only TSH has such services.

REFERENCES

American Psychiatric Association. Diagnostic and statistical manual of mental disorders, Second Edition, (DSM-II), Washington D.C.: American Psychiatric Association, 1968.

Bloch, H.A. & Behren, M.L. A study of children referred for residential treatment in New York State. New York State Interdepartmental Health Resource Board, Albany, New York, 1959.

Brody, E.B. & Klee, G.D. Psychiatric epidemiology and mental health planning. In R.R. Monroe, G.D. Klee and E.B. Brody (Eds.). Psychiatric Research Report 22. Washington, D.C.: American Psychiatric Association, 1967.

Clark, E. & Cooley, S. Patients -- chronic and current. Unpublished paper on the study of two patient groups at Topeka State Hospital, Topeka, Kansas: 1968.

Deutsch, A. The mentally ill in America. New York, New York: Columbia University Press, 1965.

Dubos, R. Man adapting. New Haven, Connecticut: Yale University, 1965.

Faris, R. & Dunham, H. Mental disorders in urban areas. Champaign, Illinois: University of Chicago Press, 1939.

Gallagher, E.B., Levinson, D.J. & Erlich, I. Some sociopsychological characteristics of patients and their relevance for psychiatric treatment. In M. Greenblatt, D.J. Levinson and R.H. Williams (Eds.). The Patient and the Mental Hospital. Glencoe, Illinois: The Free Press, 1958.

Gish, L. The first 100 years, a history of Osawatomie State Hospital. Public Information Office, Osawatomie State Hospital, Osawatomie; Kansas: 1966.

Green, H.W. Persons admitted to the Cleveland State Hospital, 1927 - 1938. Cleveland: Cleveland Health Council, 1939.

Greenblatt, M., Emery, P. & Blueck, B. (Eds.). Proverty and mental health. Psychiatric Research Report 21. Washington D.C.: American Psychiatric Association, 1967.

Guerney, B.G., Jr. & Flumen, A.B. Teachers as psychotherapeutic agents for withdrawn children. Mental Health Digest. Washington, D.C.: National Clearinghouse for Mental Health Information, 1970, 2 (10).

Hartmann, E., Glasser, B., Greenblatt, M., Solomon, M. & Levinson, D. Adolescents in a mental hospital. New York: Grune and Stratton, 1968.

Hollingshead, A. & Redlich, F. Social class and mental illness: a community study. New York: Wiley and Sons, 1958.

Hunter, R.A. & Macolpine, I. Three hundred years of psychiatry, 1535 - 1860. London: Oxford University Press, 1964.

Hurder, A. Utilization of psychiatric facilities by children and youth. Durham, North Carolina: Joint Commission on Mental Health of Children, 1967.

Johnson, J. & Rubin, E. A school follow up study of children discharged from a psychiatric hospital. Exceptional Children, 1964, 31, 19-24.

Kansas State Department of Education. Kansas educational directory, 1968-69, 1969-70, Bulletin 340. Topeka: State Printing Office.

Kansas State Department of Health, Division of Vital Statistics. 1965-1970 Population estimates for Kansas counties by age groups and sex. Report No. 6A. Topeka: State Printing Office.

Kansas State Department of Education, Division of Special Education. Emotionally disturbed programs in Kansas public schools, Topeka:1971.

Kansas State Department of Social Welfare, Division of Institutional Management, Topeka, Kansas: Year End Report, Office of Biometery, 1960, 1961, 1962, 1963, 1964, 1965, 1966, 1967, 1968, 1969, and 1970.

Kramer, M. Epidemology, biostatistics and mental health planning. In R.R. Monroe, G. Klee and E.B. Brody (Eds.). Psychiatric Research Report 22. Washington, D.C.: American Psychiatric Association, 1967.

Kramer, M., Pollack, E.S. & Redick, R. Studies of the incidence and prevalence of hospitalized mental disorders in the United States: current status and future goals. In P.H. Hoch and J. Zubin (Eds.). Comparative epidemiology of the mental disorders. New York: New York and Stratton, Inc., 1961.

Lewis, N. A short history of psychiatric achievement. New York: Norton, 1941.

Menninger, R.W. The history of psychiatry. Journal of Disorders of the Nervous System. 1944, 5, 52-55.

Monroe, R.R., Klee, G. & Brody, E. (Eds.). Psychiatric Research Report 22. Washington, D.C.: American Psychiatric Association, 1967.

Morse, W.C., Cutler, R., & Fink, A.H. Public school classes for the emotionally handicapped: a research analysis. Council for Exceptional Children, Washington, D.C., 1964.

Mowrer, E.W. Disorganization: personal and social. New York: Lippincott, 1942.

NIMH, Characteristics of patients in mental hospitals, U.S., National Center for Health Statistics, U.S. Department of Health, Education and Welfare, Series 12, Publication No. 3, Washington, D.C.: Government Printing Office, 1965.

NIMH, Data on emotionally disturbed and mentally ill youngsters. National Institute of Mental Health. Unpublished paper, December 1966.

NIMH, Mental health consultation to programs for children, National Institute of Mental Health, U.S. Department of Health, Education and Welfare, Publis Health Service Publication No. 2066, Washington, D.C.: Government Printing Office, 1970.

NIMH, Mental health of children, The Child Program of the National Institute of Mental Health, U.S. Department of Health, Education and Welfare, Public Health Service Publication No. 1396, Washington, D.C.: Government Printing Office, 1965.

NIMH, Patients in mental institutions, part II, state and county mental hospitals, 1950-1966 and Patients in state and county mental hospitals (administrative use only), U.S. Department of Health, Education and Welfare, Public Health Service, 1970.

NIMH, Utilization of psychiatric facilities by children. B.M. Rosen, M. Kramer, R.W. Redick and S.G. Willner (Eds.). U.S. Department of Health, Education and Welfare, Public Health Service Publication No. 1868, Washington, D.C.: Government Printing Office, 1968.

O'Neal, P., & Robins, L.N. The relation of childhood behavior problems to adult psychiatric status: a 30-year follow-up study of 150 subjects. American Journal of Psychiatry, 1958, 114, 961-969.

Person, P.H., Jr. The relationship between selected social and demographic characteristics of hospitalized mental patients and the outcome of hospitalization, U.S. Government Printing Office, Washington, D.C., 1964.

Phillips, E.L. Problems in educating emotionally disturbed children. In N. Haring and R. Schiefelliusch (Eds.). Methods in special education. New York: McGraw and Hill, 1967.

Queen, S.A. The ecological study of mental disorder. American Sociological Review, 1940, 5, 201-209.

Rabinow, B. A proposal for a training program for teachers of the emotionally disturbed and the socially maladjusted. Paper presented at a conference sponsored by Children's Village School District, Hawthorne Cedar Knolls State District, Second Supervisory District of Westchester County, at Children's Village, November 1959. Unpublished (memo).

Rubin, E. Special education in a psychiatric hospital. Exceptional Children, 1962, 29, 184-190.

Schroeder, C.W. Mental disorders in cities. American Journal of Sociology, 1942, 47, 40-47.

Stone, E., & Rowley, V. Educational disability in emotionally disturbed children. Exceptional Children, 1964, 30, 423-426.

Seventh Biennial Report of the Kansas State Asylum at Topeka, 1890, 11-12.

Temerlin, M.K., & Trousdale, W.W. The social psychology of clinical diagnosis. Unpublished manuscript, Department of Psychology, University of Oklahoma, 1966.

Tenth Biennial Report of the State Insane Asylum at Osawatomie, 1896, 4.

Thirty-Eighth Biennial Report, Topeka State Hospital, 1952, 18.

Thirty-Seventh Biennial Report of the Topeka State Hospital, 1950, 3-9.

Topeka State Hospital Biennial Report, 1970.

Topeka State Hospitals Clinical-Educational Services Memorandum No. 7, 1968.

Twenty-Second Biennial Report, Osawatomie State Hospital, 1927, 8.

Twenty-Sixth Biennial Report of the Osawatomie State Hospital, 1928, 5, 8, 16, 17.

Ullman, L.P. Institution and outcome. New York: Pergamon Press, 1967.

U.S. Department of Commerce, Bureau of Census. 1970 Census of Population, Kansas, Advance Report, January 1971, PC(V2)-18.

U.S. Department of Commerce, Bureau of Census. Current Population Reports: Population estimates, Series P-25, No. 321, Washington, D.C.: Government Printing Office, 1965.

U.S. Department of Commerce, Bureau of Census. Current Population Reports: Population estimates, Series P-25, No. 385, Washington, D.C.: Government Printing Office, 1968.

U.S. Department of Commerce, Bureau of Census. Current Population Reports: Population estimates and projections, Series P. 25, No. 441, Washington, D.C.: Government Printing Office, 1970.

White, M.A. School disorder, intelligence, and social class. New York: Columbia University Teachers College Press, 1966.

White, M.A., & Harris, M.W. The school psychologist. New York: Harper and Row, 1961, 47.

APPENDIX A

Number of Resident Patients in State and County Mental Hospitals, U.S., 1950-1968

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, BY AGE AND SEX
IN STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

Year	BOTH SEXES							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	512,501	1,239	18,175	54,879	97,184	108,612	102,511	129,901
1951	520,326	1,526	20,111	59,940	99,996	110,520	99,717	128,516
1952	531,981	1,614	18,940	58,638	99,056	113,683	102,499	137,551
1953	545,045	2,179	18,354	59,544	99,658	116,907	104,379	144,024
1954	553,979	2,163	18,618	59,287	99,110	118,501	104,807	151,493
1955	558,922	2,301	17,276	57,634	96,304	117,500	109,622	158,285
1956	551,390	2,617	16,785	53,642	91,714	115,857	110,929	159,846
1957	548,626	3,296	17,890	51,911	87,405	114,205	110,815	163,104
1958	545,182	3,577	18,657	49,562	83,848	113,527	110,630	165,381
1959	541,883	4,188	20,885	50,784	82,713	112,324	110,213	160,776
1960	535,540	4,417	21,350	48,133	79,468	110,341	111,125	160,706
1961	527,456	4,782	22,574	47,510	77,355	106,644	111,054	157,537
1962	515,640	4,860	23,485	45,876	74,582	103,429	110,099	153,309
1963	504,604	5,264	24,899	44,538	72,571	99,539	108,951	148,842
1964	490,449	5,118	26,369	43,521	70,098	95,360	106,150	143,833
1965	475,202	6,134	27,913	42,637	66,499	89,323	102,366	140,330
1966	452,089	6,289	27,280	41,434	62,114	82,925	97,337	134,710
1967	426,309	6,579	25,655	38,509	57,013	77,723	92,493	128,337
1968	399,152	6,365	25,315	36,546	52,623	71,166	86,997	120,140

The source of these data are the annual publications Patients in Mental Institutions, Part II, State and County Mental Hospitals, 1950-1966, and Patients in State and County Mental Hospitals, 1967 - Series A, Number 2 (U.S. Department of Health, Education, and Welfare, Public Health Service)(1970)

NUMBER OF MALE RESIDENT PATIENTS AT END OF YEAR, BY AGE AND SEX
IN STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

Year	MALE							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	250,438	736	10,643	28,101	50,142	53,707	47,124	59,985
1951	253,608	956	11,758	30,277	51,121	55,306	45,126	59,064
1952	257,982	983	10,875	29,793	50,194	57,216	45,983	62,938
1953	264,047	1,365	10,861	30,496	50,026	59,087	46,635	65,577
1954	267,102	1,351	10,913	30,376	49,138	60,290	46,785	68,249
1955	269,405	1,521	10,426	30,460	47,437	59,499	49,930	70,132
1956	265,953	1,777	10,394	28,706	45,217	58,894	50,748	70,217
1957	266,196	2,263	11,152	28,528	43,413	58,358	51,423	71,059
1958	265,164	2,475	11,764	27,750	41,777	58,110	52,068	71,220
1959	264,451	2,911	13,041	28,378	41,429	57,570	52,581	68,541
1960	262,329	3,129	13,629	27,114	39,553	56,589	54,256	68,059
1961	259,079	3,463	14,494	27,171	38,775	54,597	54,711	65,868
1962	253,672	3,488	15,012	26,853	37,443	52,821	54,776	63,279
1963	248,364	3,795	15,981	26,118	36,645	50,484	54,619	60,722
1964	241,634	3,625	16,914	25,855	35,762	48,085	53,401	57,992
1965	233,958	4,445	17,781	25,267	33,690	44,452	51,705	56,618
1966	222,190	4,499	17,329	24,812	32,151	41,078	48,629	53,692
1967	211,415	4,736	16,550	23,395	29,851	38,261	46,738	51,884
1968	199,517	4,660	16,401	22,770	28,275	35,273	44,044	48,094

The source of these data are the annual publications Patients in Mental Institutions, Part II, State and County Mental Hospitals, 1950-1966, and Patients in State and County Mental Hospitals, 1967 - Series A, Number 2 (U.S. Department of Health, Education, and Welfare, Public Health Service) 1970

NUMBER OF FEMALE RESIDENT PATIENTS AT END OF YEAR, BY AGE AND SEX
IN STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

Year	FEMALE							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	262,063	503	7,532	26,778	47,042	54,905	55,387	69,916
1951	266,718	570	8,353	29,663	48,875	55,214	54,591	69,452
1952	273,999	631	8,065	28,845	48,862	56,467	56,516	74,613
1953	280,998	814	7,493	29,048	49,632	57,820	57,744	78,447
1954	286,877	812	7,705	28,911	49,972	58,211	58,022	83,244
1955	289,517	780	6,850	27,174	48,867	58,001	59,692	88,153
1956	285,437	840	6,391	24,936	46,497	56,963	60,181	89,629
1957	282,430	1,033	6,738	23,383	43,992	55,847	59,392	92,045
1958	280,018	1,102	6,893	21,812	42,071	55,417	58,562	94,161
1959	277,432	1,277	7,844	22,406	41,284	54,754	57,632	92,235
1960	273,211	1,288	7,721	21,019	39,915	53,752	56,869	92,647
1961	268,377	1,319	8,080	20,339	38,580	52,047	56,343	91,669
1962	261,968	1,372	8,473	19,023	37,139	50,608	55,323	90,030
1963	256,240	1,469	8,918	18,420	35,926	49,055	54,332	88,120
1964	248,815	1,493	9,455	17,666	34,336	47,275	52,749	85,841
1965	241,244	1,689	10,132	17,370	32,809	44,871	50,661	83,712
1966	229,899	1,790	9,951	16,622	29,963	41,847	48,708	81,018
1967	214,894	1,843	9,105	15,114	27,162	39,462	45,755	76,453
1968	199,635	1,705	8,914	13,776	24,348	35,893	42,953	72,046

The source of these data are the annual publications Patients in Mental Institutions, Part II, State and County Mental Hospitals, 1950-1966, and Patients in State and County Mental Hospitals, 1967 - Series A, Number 2 (U.S. Department of Health, Education, and Welfare, Public

APPENDIX B

Number of Resident Patients, by Diagnosis, in State and County Mental Hospitals, U.S., 1950-1968

Biometry Branch, OPPE, National Institute of Mental Health, Health Services and Mental Health Administration, Trends in Resident Patients, State and County Mental Hospitals, 1950-1968, (April 1970)

Mental Deficiency

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, MENTAL DEFICIENCY, STATE AND COUNTY MENTAL HOSPITALS, BY AGE, UNITED STATES, 1950-1968

Year	Both Sexes							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	48,226	582	4,636	9,337	10,520	10,362	7,639	5,150
1951	53,646	755	5,647	10,801	11,868	11,094	8,070	5,411
1952	54,741	796	4,984	10,546	12,158	11,764	8,650	5,843
1953	51,616	629	4,362	9,856	11,253	11,500	8,204	5,812
1954	50,744	640	4,163	9,349	11,208	11,238	8,174	5,971
1955	47,620	481	3,526	8,584	10,599	10,601	7,997	5,833
1956	47,530	479	3,571	8,292	10,600	10,539	8,156	5,893
1957	42,793	457	3,342	7,320	9,569	9,322	7,396	5,387
1958	43,015	439	3,116	7,057	9,659	9,642	7,507	5,595
1959	43,351	423	3,321	7,091	9,720	9,860	7,575	5,415
1960	43,486	424	3,271	6,782	9,627	9,892	7,907	5,583
1961	44,465	776	3,732	6,805	9,763	9,935	8,081	5,373
1962	42,850	524	3,486	6,339	9,395	9,707	7,970	5,429
1963	42,084	562	3,511	5,969	9,061	9,599	8,020	5,362
1964	41,345	585	4,647	5,854	8,999	9,392	7,788	5,080
1965	39,727	748	4,101	5,526	8,210	8,942	7,360	4,840
1966	37,440	706	3,931	5,215	7,583	8,262	6,910	4,833
1967	35,950	794	3,737	4,910	7,130	8,091	6,702	4,586
1968	33,994	921	3,743	4,540	6,630	7,529	6,273	4,358

Acute-Chronic Brain Syndrome

NUMBER AND RATE OF RESIDENT PATIENTS AT END OF YEAR, DISEASES OF THE SENIUM, BY AGE
STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

BOTH SEXES

YEAR	NUMBER				RATES PER 100,000 POPULATION			
	TOTAL	UNDER 65	65-74	75 +	TOTAL	UNDER 65	65-74	75 +
1950	63,698	9,050	23,919	30,729	42.4	6.6	284.9	789.9
1951	61,878	8,756	22,988	30,134	41.0	6.3	266.5	750.2
1952	64,648	8,462	23,406	32,780	42.2	6.0	264.7	789.5
1953	66,465	7,804	23,988	34,673	42.6	5.5	265.2	808.4
1954	71,765	8,564	25,185	38,016	45.1	5.9	272.6	852.4
1955	73,772	8,672	24,842	40,258	45.5	5.9	263.8	865.2
1956	73,517	8,522	24,705	40,290	44.5	5.6	257.9	834.7
1957	76,336	8,092	25,821	42,423	45.3	5.3	265.2	846.1
1958	74,095	7,449	24,642	42,004	43.2	4.8	249.7	811.5
1959	73,520	7,820	24,530	41,170	42.1	4.9	244.6	769.5
1960	70,354	7,179	22,940	40,235	39.5	4.4	207.9	715.4
1961	70,064	7,108	22,335	40,621	38.7	4.3	200.0	695.1
1962	66,137	6,617	21,096	38,424	36.0	4.0	187.2	636.3
1963	63,418	6,432	19,894	37,092	34.0	3.8	175.5	595.2
1964	61,159	6,021	19,065	36,073	32.3	3.5	167.1	559.2
1965	59,305	5,843	18,390	35,072	30.9	3.4	160.1	525.9
1966	56,246	5,746	17,550	32,950	29.0	3.3	151.7	478.4
1967	52,875	5,314	16,295	31,266	27.0	3.0	140.3	441.6
1968	49,158	4,924	15,067	29,167	24.9	2.8	127.8	397.2

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, DRUG INTOXICATION, BY AGE
STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

Year	Both Sexes - Age (in years)							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65 & Over
1950	459	-	12	33	89	106	130	89
1951	436	-	12	42	76	94	110	102
1952	460	-	15	40	76	110	117	102
1953	674	2	39	84	126	143	155	125
1954	556	2	8	36	83	128	160	139
1955	567	1	13	37	79	142	143	152
1956	574	1	10	44	64	124	174	157
1957	483	2	10	39	54	109	144	125
1958	757	2	14	58	72	173	223	215
1959	517	4	14	44	59	104	154	138
1960	571	1	21	46	70	133	156	144
1961	572	1	15	48	69	136	142	161
1962	545	3	26	48	60	132	149	127
1963	602	9	24	60	73	131	178	127
1964	684	15	49	60	78	150	186	146
1965	585	7	43	78	89	112	141	115
1966	482	9	36	49	71	97	122	98
1967	613	3	69	51	76	114	187	113
1968	611	5	107	69	83	108	145	94

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, CHRONIC BRAIN SYNDROME ASSOCIATED WITH CENTRAL NERVOUS SYSTEM SYPHILIS, STATE AND COUNTY MENTAL HOSPITALS, BY SEX AND AGE: UNITED STATES 1950-1968

Year	Both Sexes							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	33,245	6	344	1,264	7,007	11,638	8,375	4,611
1951	32,360	12	390	1,420	6,523	11,609	7,809	4,597
1952	31,643	15	353	1,240	5,559	11,479	8,091	4,906
1953	30,780	10	282	1,072	4,750	11,321	8,092	5,253
1954	30,469	10	255	1,064	4,282	11,286	8,229	5,343
1955	29,017	16	192	887	3,548	10,381	8,437	5,556
1956	27,622	8	156	755	3,060	9,661	8,511	5,471
1957	25,233	11	133	620	2,400	8,288	8,361	5,420
1958	23,384	7	108	482	1,923	7,335	8,195	5,334
1959	22,224	2	107	476	1,862	6,743	7,927	5,107
1960	21,184	15	82	396	1,543	5,891	8,126	5,131
1961	19,511	6	55	372	1,333	5,114	7,825	4,806
1962	18,063	3	44	298	1,080	4,342	7,620	4,676
1963	16,098	4	34	255	913	3,495	6,988	4,409
1964	14,890	4	37	215	771	3,075	6,586	4,202
1965	13,614	7	61	267	767	2,529	5,829	4,154
1966	11,531	8	47	229	666	1,992	4,838	3,751
1967	10,105	8	25	143	504	1,583	4,345	3,497
1968	8,483	2	11	97	354	1,213	3,641	3,165

Psychotic Disorders

NUMBER OF RESIENT PATIENTS AT END OF YEAR, SCHIZOPHRENIC REACTIONS, BY AGE
STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

Year	Both Sexes							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65 and over
1950	232,110	110	8,579	32,986	57,680	55,096	44,298	33,361
1951	235,163	122	8,939	35,103	59,253	56,106	43,362	32,278
1952	241,584	195	8,517	34,667	59,452	59,081	44,771	34,901
1953	253,044	249	8,411	36,091	61,913	61,927	46,984	37,469
1954	260,254	245	8,808	36,813	62,564	64,062	47,817	39,945
1955	267,995	374	8,156	36,819	63,269	65,895	50,302	43,180
1956	262,114	484	7,738	33,569	59,853	65,532	51,152	43,786
1957	270,727	840	8,750	33,846	57,911	68,043	53,973	47,364
1958	269,456	1,044	9,061	31,951	55,202	68,234	54,571	49,393
1959	269,844	1,236	10,614	32,892	54,204	67,618	54,828	48,452
1960	268,725	1,308	10,798	30,915	51,627	67,238	56,207	50,632
1961	263,551	1,339	11,089	30,068	49,713	65,058	56,575	49,709
1962	259,491	1,462	11,687	28,889	47,905	63,459	56,789	49,300
1963	253,675	1,548	12,049	27,659	46,072	61,211	56,655	48,481
1964	245,813	1,688	12,491	26,695	44,012	58,119	55,917	46,891
1965	236,318	1,729	13,149	26,197	41,381	54,017	53,732	46,113
1966	217,878	1,685	12,186	24,498	37,051	48,514	50,176	43,768
1967	209,748	1,820	11,482	23,068	34,560	46,032	49,713	43,073
1968	194,922	1,774	10,887	21,531	31,314	41,815	46,689	40,912

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, MANIC DEPRESSIVE REACTIONS, BY AGE AND SEX, STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

Year	Both Sexes							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	39,514	--	435	2,009	5,698	8,804	10,435	12,133
1951	41,938	--	575	2,357	6,086	9,155	10,805	12,960
1952	40,909	--	437	2,043	5,437	8,860	10,545	13,587
1953	37,172	--	211	1,449	4,720	8,005	9,689	13,098
1954	36,507	--	232	1,508	4,380	7,727	9,368	13,292
1955	34,485	--	184	1,194	3,976	7,197	9,099	12,835
1956	32,256	--	151	989	3,354	6,592	8,837	12,333
1957	27,486	--	137	733	2,475	5,524	7,753	10,864
1958	26,278	--	131	579	2,155	5,121	7,456	10,836
1959	24,818	--	140	604	1,945	4,893	7,041	10,195
1960	23,189	--	92	472	1,633	4,448	6,646	9,898
1961	22,364	--	97	485	1,597	4,227	6,444	9,514
1962	21,141	--	120	507	1,444	3,927	6,103	9,040
1963	19,780	--	98	454	1,373	3,437	5,804	8,614
1964	18,882	--	87	383	1,235	3,255	5,595	8,327
1965	17,012	5	185	491	1,177	2,755	4,857	7,542
1966	15,830	9	174	440	1,123	2,482	4,525	7,077
1967	13,935	3	128	309	816	2,162	3,966	6,551
1968	12,073	2	93	287	689	1,703	3,489	5,810

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, PSYCHOTIC DEPRESSIVE REACTIONS, BY AGE
STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1953-1968

Year	Both Sexes - Age (in years)							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1953	1,390	2	12	52	159	229	402	534
1954	1,674	2	25	152	258	289	393	555
1955	1,494	2	26	112	216	290	401	447
1956	2,154	2	40	142	284	669	497	520
1957	1,938	1	35	171	362	343	458	568
1958	2,126	1	53	179	283	391	556	663
1959	2,545	4	64	162	346	511	648	810
1960	3,259	1	68	248	504	651	819	968
1961	2,553	5	72	216	343	481	683	753
1962	2,797	5	90	229	370	540	733	830
1963	3,167	6	94	299	436	638	819	875
1964	3,175	13	124	270	422	624	809	913
1965	3,100	5	135	291	408	561	818	882
1966	2,516	4	79	223	327	473	704	706
1967	2,345	11	88	190	277	441	656	682
1968	2,040	6	82	178	241	390	585	558

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, OTHER PSYCHOTIC DISORDERS,[1/]
STATE AND COUNTY MENTAL HOSPITALS, BY AGE, UNITED STATES, 1950-1968

Year	BOTH SEXES							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	32,851	33	395	1,010	2,699	7,437	11,245	10,032
1951	32,000	66	327	917	2,448	7,021	10,775	10,446
1952	31,280	11	325	861	2,251	6,346	10,576	10,910
1953	30,850	42	261	752	2,200	6,251	10,370	10,974
1954	33,848	59	487	1,197	2,771	6,770	10,762	11,802
1955	31,300	42	317	872	2,087	5,970	10,468	11,544
1956	30,437	10	183	733	1,861	5,841	10,333	11,476
1957	31,272	41	392	982	1,908	5,320	10,565	12,064
1958	29,712	30	328	796	1,539	4,861	9,851	12,307
1959	29,207	39	342	731	1,549	4,867	9,648	12,031
1960	28,491	47	329	811	1,620	4,599	8,994	12,091
1961	26,426	45	326	759	1,401	4,060	8,403	11,432
1962	25,524	42	374	729	1,291	3,913	7,964	11,211
1963	24,776	41	385	781	1,317	3,732	7,599	10,921
1964	23,542	47	462	753	1,239	3,546	7,047	10,448
1965	21,764	41	311	572	1,115	3,202	6,591	9,932
1966	25,224	207	846	1,243	1,902	3,972	6,995	10,059
1967	18,324	55	308	557	923	2,628	5,302	8,551
1968	17,328	47	383	585	901	2,389	4,954	8,069

1/ Excludes schizophrenic and manic depressive reactions, but includes psychotic depressive reactions.

Psycho-Neurotic Disorders

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, PSYCHONEUROTIC REACTIONS, BY AGE, STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

Year	BOTH SEXES							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	5,689	23	365	904	1,271	1,211	1,075	840
1951	4,839	17	335	771	1,030	958	925	803
1952	5,533	36	334	850	1,268	1,165	1,016	864
1953	5,178	39	299	889	1,102	1,047	956	846
1954	5,041	26	286	836	1,122	1,032	900	839
1955	5,366	33	290	841	1,118	1,156	1,029	899
1956	5,734	39	309	846	1,146	1,246	1,190	958
1957	5,322	48	314	787	1,004	1,175	1,046	948
1958	5,942	50	393	838	1,122	1,307	1,209	1,023
1959	6,394	66	449	943	1,227	1,317	1,270	1,122
1960	6,534	94	506	911	1,250	1,364	1,295	1,114
1961	6,962	125	551	1,016	1,299	1,428	1,355	1,188
1962	7,064	112	581	1,003	1,330	1,438	1,419	1,181
1963	7,720	144	702	1,075	1,514	1,496	1,539	1,250
1964	7,945	141	803	1,211	1,523	1,501	1,549	1,217
1965	7,841	134	771	1,152	1,424	1,533	1,564	1,263
1966	8,163	205	814	1,234	1,495	1,496	1,559	1,360
1967	7,636	209	783	1,140	1,310	1,414	1,506	1,274
1968	7,483	231	905	1,134	1,249	1,368	1,413	1,183

Transient Situational Personality

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE, STATE AND COUNTY MENTAL HOSPITALS, BY AGE, UNITED STATES, 1953-1968

Year	BOTH SEXES							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1953	981	449	290	62	54	57	25	44
1954	1,053	396	322	88	73	72	38	64
1955	1,062	294	302	90	94	87	82	113
1956	1,434	425	347	154	175	100	81	152
1957	1,865	882	584	84	79	64	57	115
1958	2,235	941	805	112	88	75	71	143
1959	2,493	1,081	863	101	103	77	94	174
1960	2,624	1,127	978	94	98	67	103	157
1961	2,743	1,129	1,023	107	110	89	101	184
1962	3,042	1,310	1,195	96	93	72	98	178
1963	3,381	1,432	1,361	112	84	88	109	195
1964	3,482	1,256	1,513	150	128	110	125	200
1965	3,991	1,600	1,710	135	109	109	133	195
1966	3,763	1,501	1,651	137	103	79	110	182
1967	3,828	1,623	1,641	125	86	83	106	164
1968	4,034	1,540	1,823	181	101	82	106	201

Personality Disorders

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, PERSONALITY DISORDERS (EXCLUDING ALCOHOLISM ADDICTION), STATE AND COUNTY MENTAL HOSPITALS, BY AGE, UNITED STATES, 1950-1968

Year	Both Sexes							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	7,841	32	1,029	1,666	1,805	1,484	986	839
1951	7,753	18	1,020	1,646	1,825	1,494	955	795
1952	7,395	36	948	1,501	1,689	1,385	990	846
1953	7,794	86	1,266	1,744	1,574	1,344	995	785
1954	9,141	171	1,455	2,065	1,825	1,629	1,124	872
1955	8,552	176	1,477	1,874	1,678	1,495	991	861
1956	8,767	230	1,617	1,898	1,686	1,472	1,023	841
1957	7,406	258	1,502	1,448	1,397	1,257	852	692
1958	7,851	252	1,825	1,535	1,435	1,269	852	683
1959	8,128	291	1,861	1,633	1,570	1,231	883	659
1960	8,569	297	2,125	1,743	1,573	1,268	886	677
1961	9,336	358	2,357	1,934	1,755	1,346	912	674
1962	9,539	352	2,536	2,021	1,772	1,303	943	612
1963	10,546	344	3,057	2,262	1,955	1,383	961	584
1964	11,280	375	3,428	2,500	1,999	1,423	972	583
1965	10,549	435	3,279	2,295	1,841	1,285	867	547
1966	10,474	453	3,123	2,293	1,890	1,275	868	572
1967	9,894	403	2,952	2,077	1,738	1,319	873	532
1968	9,928	495	3,225	2,123	1,587	1,219	799	480

NUMBER OF RESIDENT PATIENTS AT END OF YEAR, DRUG ADDICTION, BY AGE
STATE AND COUNTY MENTAL HOSPITALS, UNITED STATES, 1950-1968

Year	BOTH SEXES - AGE (IN YEARS)							
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65+
1950	380	-	26	57	112	99	45	41
1951	422	-	51	76	139	98	39	19
1952	418	-	70	75	93	88	54	38
1953	448	-	81	113	81	77	63	33
1954	480	2	59	105	96	100	74	44
1955	444	-	74	89	88	70	73	50
1956	506	-	77	114	84	113	59	59
1957	351	-	48	73	62	79	54	35
1958	328	1	39	69	53	68	67	31
1959	299	-	22	47	67	71	63	29
1960	391	-	36	78	71	108	70	28
1961	481	-	61	113	98	102	71	36
1962	506	2	63	139	88	96	82	36
1963	772	-	178	216	148	90	89	51
1964	1,089	1	295	361	159	134	96	43
1965	928	1	271	301	158	94	70	33
1966	1,091	1	337	358	197	82	76	40
1967	1,007	2	358	283	182	98	59	25
1968	1,509	1	713	410	197	80	76	32

APPENDIX C

Resident Patients at End of Year, by Hospital, Age, Sex, and Mental Disorder (1961-1968)

Office of Biometrics, Division of Institutional Management, Topeka, Kansas, "Year End Reports," 1961-1968

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Larned, 1961

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male								
Female								
15-24								
Male	5	40	1	24	4	4		78
Female	2	13	3	5	7	2		32
25-34								
Male	10	43	3	16		8		80
Female	5	34	2	4		5		50
35-44								
Male	11	67	2	11	1	23		115
Female	11	72	3	2	1	12		101
45-54								
Male	23	77	3	11		17		131
Female	8	73	4	3		6		94
55-64								
Male	34	69	2	6		16		127
Female	10	81	4	4		7		106
65-74								
Male	20	31	2	2	1	10		66
Female	15	44	4			4		72
75-84								
Male	30	25			1	4		60
Female	28	17	1	1		1		48
85 and over								
Male	5	4				1		10
Female	10	3				1		14

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Osawatomie, 1961

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male								
Female								
15-24								
Male	7	19	1	10	5			42
Female	4	4	2	5	2			17
25-34								
Male	7	26	3	6	2	3		47
Female	2	26	3	3		7		41
35-44								
Male	17	37	2	3		4		63
Female	10	61	3	3		7		84
45-54								
Male	23	82	2	3	1	5		116
Female	21	71	4	1		6		103
55-64								
Male	46	52	3	3		10		114
Female	24	93	1	5	2	11		136
65-74								
Male	26	25				6		57
Female	37	68	2	2	1	7		117
75-84								
Male	36	22	1		1	2		62
Female	24	33	1	1		3		62
85 and over								
Male	7					1		8
Female	13	5				1		19

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Topeka, 1961

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	4	11	11	4	1		2	33
Female	2	5	5		3			15
15-24								
Male	8	43	5	13	8		1	78
Female	1	38	12	21	6			78
25-34								
Male	1	48	1	6		3		59
Female	1	49	4	4		1		59
35-44								
Male	6	57	2	4		2	1	72
Female	6	71	6	5		3		91
45-54								
Male	12	80	4	7		5		108
Female	8	79	4			2		93
55-64								
Male	17	63	4	2		2	1	89
Female	15	56	6			6		83
65-74								
Male	18	32	2			3		55
Female	12	33	1	3		5		54
75-84								
Male	23	13						36
Female	12	15						27
85 and over								
Male	3							3
Female	2	1						3

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER

Larned, 1962

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male								
Female								
15-24								
Male	5	28	4	27	3	4		71
Female	3	12	1	8	3	4		31
25-34								
Male	12	49	2	26		11		100
Female	4	32	4	2		1		43
35-44								
Male	13	62	7	12	2	24		120
Female	13	65	5	5		9		97
45-54								
Male	19	75	2	7		14		117
Female	9	68	3	1		5		86
55-64								
Male	31	63	3	5		15		117
Female	12	71	5	3		7		98
65-74								
Male	21	28	2	1		7		62
Female	13	47	2	1		4		67
75-84								
Male	21	16		1	1	4		46
Female	32	13				1		46
85 and over								
Male	6	4				1		11
Female	5	2		1		1		9

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Osawatomie, 1962

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male								
Female								
15-24								
Male	4	22	2	11	3	2		44
Female	1	14	3	5	2	1		26
25-34								
Male	8	32	3	6		3		52
Female	4	31	6	5		6		52
35-44								
Male	13	38	1	4		3		59
Female	7	64	8	3	1	7		90
45-54								
Male	22	69	1	2	1	3		98
Female	16	65	5	2	1	5		94
55-64								
Male	38	54	3			11		106
Female	24	76	6	2	1	9		118
65-74								
Male	27	29	1	1		3		61
Female	38	56	1	3	1	5		104
75-84								
Male	21	19	1	1		3		48
Female	33	22	1	1		3		60
85 and over								
Male	6	1				2		9
Female	8	7				1		16

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Topeka, 1962

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	5	13	9	1		1	3	32
Female	1	5	4	2			1	13
15-24								
Male	7	42	5	15	17	1		87
Female	4	38	6	12	3		2	65
25-34								
Male	2	62	1	2		3		70
Female	2	64	9	4	1		1	81
35-44								
Male	9	57		6		1		73
Female	5	76	5	1	1		5	93
45-54								
Male	9	59	2	3		6		79
Female	14	86	4	2	1		1	108
55-64								
Male	14	57	2	1		3		77
Female	10	55	4	1			5	75
65-74								
Male	14	28	2			3		47
Female	14	30	1				5	50
75-84								
Male	21	8						29
Female	13	17						30
85 and over								
Male	4							4
Female	4							4

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Larned, 1963

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male								
Female								
15-24								
Male	9	34	1	32	14	4		94
Female	2	12	1	3	4			22
25-34								
Male	9	42	4	10		11		76
Female	2	32	3	1		1		39
35-44								
Male	11	69	3	20	1	19		123
Female	10	50	5	5	1	7		78
45-54								
Male	22	59	2	11		11		105
Female	7	54	3	1		5		70
55-64								
Male	23	53	2	7		12		97
Female	11	59	5	6		6		87
65-74								
Male	20	21	1	1		5		48
Female	18	41	3			4		66
75-84								
Male	15	15			1	3		34
Female	30	13				1		44
85 and over								
Male	5	1				2		8
Female	3	2		1				6

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Osawatomie, 1963

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male					2			2
Female								
15-24								
Male	5	28	3	8	6	2		52
Female	1	10	8	9	1	1		30
25-34								
Male	7	25	2	9		6		49
Female	3	30	4	3		1		41
35-44								
Male	15	32	3	2		2		54
Female	7	64	7	1	1	8		88
45-54								
Male	17	61	5	6		2		91
Female	18	60	9	1		6		94
55-64								
Male	36	51	4			11		102
Female	21	67	11	2	1	7		109
65-74								
Male	21	25				2		48
Female	34	46	2	1	1	4		88
75-84								
Male	24	13	1	1	1	3		43
Female	28	19		1		4		52
85 and over								
Male	8					3		11
Female	6	7				1		14

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER

Topeka, 1963

AGE (in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	8	14	10	1				33
Female	1	8	2	3			1	15
15-24								
Male	5	43	8	22	10	2		90
Female	4	37	3	17	3			64
25-34								
Male	3	50	1	6		2		62
Female	3	57	4	8	1		2	75
35-44								
Male	9	50	1	8		3	1	72
Female	6	71	9	6			5	97
45-54								
Male	5	52		6		6		69
Female	9	81	8	6				104
55-64								
Male	10	52	1	7		3		73
Female	9	68	7		1		3	88
65-74								
Male	18	20	1			2		41
Female	16	25	2	2			6	51
75-84								
Male	20	8						28
Female	10	19	1					30
85 and over								
Male	5	1						6
Female	2							2

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Larned, 1964

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male						1		1
Female								
15-24								
Male	6	40		44	10	6		106
Female	5	14	1	5	5	2		32
25-34								
Male	12	37	3	17		13		82
Female	2	19	5	2	1	1		30
35-44								
Male	10	63	3	18	1	12	1	108
Female	10	53	7	3	1	3		77
45-54								
Male	14	46	4	18	1	5		88
Female	9	53	5	3		4		74
55-64								
Male	27	47	2	8		10		94
Female	11	50	1	3		5		70
65-74								
Male	22	16	2			4		44
Female	10	37	4	1		5		57
75-84								
Male	14	12		1	1	3		31
Female	22	11	1			1		35
85 and over								
Male	6	1						7
Female	8	3		1				12

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Osawatomie, 1964

AGE(in years)		MENTAL DISORDER							
		Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15	Male								
	Female								
15-24	Male	7	29	4	18	8	2		68
	Female	3	18	5	4	5			35
25-34	Male	2	25	4	9		2		42
	Female	3	29	13	2	1		2	50
35-44	Male	12	40	3	4		4		63
	Female	3	66	6	1	1		9	86
45-54	Male	13	49	1	8		3		74
	Female	13	58	7	2			7	87
55-64	Male	26	39	2	2		8		77
	Female	13	59	5	4	1		3	85
65-74	Male	26	22		1		2		51
	Female	28	37	1	2			4	72
75-84	Male	23	9	1			1		34
	Female	35	12	1	1			2	51
85 and over	Male	2	1				1		4
	Female	9	4					2	15

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Topeka, 1964

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	8	15	9					32
Female		13	3	2				18
15-24								
Male	5	52	6	10	9	2		84
Female	2	35	8	12	5	1		63
25-34								
Male	3	58	4	2		2		69
Female	2	51	10	7	1	1		72
35-44								
Male	5	55	1	9				70
Female	4	77	8	5	1	5		100
45-54								
Male	9	47	2	5		3		66
Female	9	79	14	2				104
55-64								
Male	10	51	4	2		3		70
Female	8	56	4	2	1	1		72
65-74								
Male	14	20				2		36
Female	8	19	1	3		4		35
75-84								
Male	17	11						28
Female	7	20		1		2		30
85 and over								
Male	2	2						4
Female	2	1						3

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Larned, 1965

	MENTAL DISORDER							
AGE(in years)	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male						1		1
Female								
15-24								
Male	13	32	3	21	11	6		86
Female	3	17	2	8	4	3		37
25-34								
Male	9	45	3	13		8		78
Female	2	20	3	2	1	2		30
35-44								
Male	9	47	3	18	1	10		88
Female	10	57	6	1		3		77
45-54								
Male	11	42	3	10		4		69
Female	3	43	4	2		4		56
55-64								
Male	25	40	3	6		10		84
Female	13	48	3	1		2		67
65-74								
Male	20	10		2	1	4		37
Female	14	24	2			1		41
75-84								
Male	12	8				2		22
Female	17	8	1					26
85 and over								
Male	1	2			1			4
Female	4	2		1				7

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Osawatomie, 1965

AGE (in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	1							1
Female								
15-24								
Male	4	34	8	13	3	3		65
Female	3	20	14	8	4	1		50
25-34								
Male	3	28	4	4	1	3		43
Female	4	33	6	2	1	1		47
35-44								
Male	9	29		6		2		46
Female	3	66	6	2		9		86
45-54								
Male	12	50		5		2		69
Female	15	55	4	6		5		85
55-64								
Male	21	36	3	2		7		69
Female	12	52	6	1	1	3		75
65-74								
Male	22	23		1		2		48
Female	29	31	3	1		3		67
75-84								
Male	20	8	1					29
Female	34	18	1			1		54
85 and over								
Male	8	1				1		10
Female	5	2				1		8

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Topeka, 1965

	MENTAL DISORDER							
AGE(in years)	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	8	12	8	1		2		31
Female	2	10	2	1				15
15-24								
Male	3	58	7	18	9	3		98
Female	1	48	9	13	7			78
25-34								
Male	2	49	2	11	1	1		66
Female	1	58	11	10	1	2		83
35-44								
Male	7	50	3	7		3		70
Female	2	70	8	4		3		87
45-54								
Male	8	43	1	4		5		61
Female	9	66	5	5		1		86
55-64								
Male	13	40	1	4	1	1		60
Female	7	48	7	1		1		64
65-74								
Male	16	18			2	2		38
Female	18	21	4			4		47
75-84								
Male	12	8	1					21
Female	17	16				1		34
85 and over								
Male	8	2						10
Female	4	1				1		6

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Larned, 1966

AGE (in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male					1			1
Female								
15-24								
Male	11	33		33	9	10		96
Female	5	17	2	6	5	2		37
25-34								
Male	7	49	6	22		10		94
Female	1	21	5	3	1	3		34
35-44								
Male	9	49	2	16	1	9		86
Female	9	46	5		1	2		63
45-54								
Male	14	39	2	13	1	1		70
Female	7	33	6	2	1	3		71
55-64								
Male	22	29	1	8	1	5		66
Female	12	29	2	3	1	1		48
65-74								
Male	24	11				1		36
Female	15	23	2			1		41
75-84								
Male	13	9			1	3		26
Female	14	8	1	1				24
85 and over								
Male								
Female								

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Osawatomie, 1966

AGE (in years)		MENTAL DISORDER							
		Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15	Male								
	Female								
15-24	Male	6	27	3	10	5	3		63
	Female	3	22	5	7	5	1		43
25-34	Male	2	32	3	3	1	4		45
	Female	4	30	8	1		2		45
35-44	Male	8	22	2	2		2		36
	Female	7	53	5	3		9		77
45-54	Male	9	33	2	3		4		51
	Female	7	58	4	2		4		75
55-64	Male	18	27	5	2		6		58
	Female	11	44	6			2		63
65-74	Male	18	10		1	1	1		31
	Female	27	24	2			2		55
75-84	Male	32	5	1			1		39
	Female	44	17	1					62
85 and over	Male								
	Female								

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Topeka, 1966

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	5	21	5		1	2		34
Female	1	17		1				19
15-24								
Male	8	66	6	25	10	1		116
Female	2	50	6	11	9	1		79
25-34								
Male		55	1	8		3		67
Female	2	45	7	8	2	2		66
35-44								
Male	7	50		8	1	1		67
Female	3	66	10	6	1	3		89
45-54								
Male	8	30		6		4		48
Female	6	69	5	5				85
55-64								
Male	10	37	1	2		1		51
Female	10	46	2	1		2		61
65-74								
Male	13	15	1	1		1		31
Female	11	17	1			4		33
75-84								
Male	12	10						22
Female	13	13				2		28
85 and over								
Male								
Female								

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Larned, 1957

AGE (in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male					3	1		4
Female		1						1
15-24								
Male	7	42	3	34	16	10		112
Female	4	13	4	6	2	4		33
25-34								
Male	5	50	2	20		9		86
Female	3	18	11	2		4		38
35-44								
Male	10	46	5	17	2	4		84
Female	5	48	2	1	1	4		61
45-54								
Male	12	34	1	25		2		74
Female	10	49	3	4		2		68
55-64								
Male	17	25		10		4		56
Female	12	24	1		2	1		40
65-74								
Male	21	11			1	2	1	36
Female	17	27	2			1		47
75-84								
Male	11	9			2	2		24
Female	12	5		1				18
85 and over								
Male								
Female								

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Oswaitomie, 1967

AGE (in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male		1	1		1			3
Female								
15-24								
Male	2	32	2	13	12	10		71
Female	4	24	8	9	8	1		54
25-34								
Male	2	35	5	10	1	5		58
Female	2	14	10	1		2		29
35-44								
Male	4	25	2	6		4		41
Female	8	54	7	2		7		78
45-54								
Male	12	20	2	4		1		39
Female	10	54	8	3		6		81
55-64								
Male	18	22	1	4	2	5		52
Female	12	38	8	2		3		63
65-74								
Male	15	9	1	1				26
Female	27	13	3			2		45
75-84								
Male	28	5						33
Female	46	15						61
85 and over								
Male								
Female								

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Topeka, 1967

AGE(in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	4	31	3			1		39
Female		13		1				14
15-24								
Male	10	64	6	21	8	2		111
Female	3	65	4	13	11			96
25-34								
Male		53	4	10		1		68
Female	4	37	3	5		1		50
35-44								
Male	5	52	1	4		1		63
Female	4	72	7	7		2		92
45-54								
Male	11	31	1	2		5		50
Female	9	63	7					79
55-64								
Male	9	34	2	3	1	1		50
Female	9	53	2	1		1		66
65-74								
Male	12	14						26
Female	13	16	2			4		34
75-84								
Male	7	4						11
Female	12	8				1		21
85 and over								
Male								
Female								

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Larned, 1968

	MENTAL DISORDER							
AGE(in years)	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	1				1			2
Female		1			2			3
15-24								
Male	7	34	1	20	17	10		89
Female	1	7	2	5	11	5		31
25-34								
Male	10	49	2	22	3	9	1	95
Female	2	22		4	2	3		33
35-44								
Male	9	43	5	18	2	3		80
Female	3	36	1	1		2		43
45-54								
Male	11	28	1	13	3	2		58
Female	6	31	3	3	1	2		53
55-64								
Male	20	22	1	14	2	4		63
Female	9	23	3			1		36
65-74								
Male	13	6		1	2			22
Female	14	18						32
75-84								
Male	8	7				2		17
Female	9	6		1				16
85 and over								
Male								
Female								

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER

Osawatomie, 1968

AGE (in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	1	3		2	1	1		8
Female				1				1
15-24								
Male	7	40	7	19	8	3		84
Female	6	23	1	15	7			58
25-34								
Male	4	40	2	9		3		58
Female	2	21	6	3	1	3		36
35-44								
Male	5	17	4	10		3		39
Female	7	47	10	2		5		71
45-54								
Male	14	21	1	11		1		48
Female	6	37	6	3		7		59
55-64								
Male	9	23	4	5	1	3		45
Female	15	25	4	2		2		48
65-74								
Male	11	5		2				18
Female	18	9	1			2		30
75-84								
Male	24	4						28
Female	36	11	1					48
85 and over								
Male								
Female								

RESIDENT PATIENTS AT END OF YEAR
BY AGE, SEX, AND MENTAL DISORDER
Topeka, 1968

AGE (in years)	MENTAL DISORDER							
	Acute and Chronic Brain Syndromes	Psychotic Disorders	Psychoneurotic Reactions	Personality Disorders	Transient Situational Personality Disturbance	Mental Deficiency	Undiagnosed or Without Mental Disorder	Total
under 15								
Male	5	26	2	2	2			37
Female		18		1	2			21
15-24								
Male	9	63	9	19	15	1		116
Female	2	56	4	15	9	1		87
25-34								
Male	1	44	2	9		4		60
Female	3	33	8	6	1	2		53
35-44								
Male	3	37	1	9				50
Female	2	55	7	2		3		69
45-54								
Male	12	24		4		5		45
Female	5	55	3	2				65
55-64								
Male	9	21	1	1		1		33
Female	6	40	3			1		50
65-74								
Male	6	9	1	1	1			18
Female	9	13	1	1		2		26
75-84								
Male	7	2						9
Female	6	4						10
85 and over								
Male								
Female								

APPENDIX D

Resident Patient Population 5 thru 19 years as of 6/30/70 by:

County

Birthdate

Age at admission

Education at admission

Sex

Race

Religion

Admission status

Major diagnosis

City of residence

Office of Biometrics, Division of Institutional Management, Topeka, Kansas, "Year End Reports," 1970

Columns	Item
37	Race X - Not reported or Unknown Do not punch. 1 - White 2 - Negro 3 - Indian 4 - Other
38	Religion X - Not reported Do not punch. 1 - Protestant 2 - Catholic 3 - Jewish 4 - Other 5 - None 6 - No answer, Unknown
39	Marital Status X - Not reported Do not punch. 1 - Never Married 2 - Married 3 - Divorced 4 - Widowed 5 - Separated 6 - Unknown
40-41	Education XX - Not reported or Unknown Do not punch. 01-12 - Number of grades completed in secondary school 13 - 1 year college 14 - 2 years college 15 - 3 years college 16 - 4 years college 17 - College degree 18 - Graduate work, but no degree 19 - Graduate work, masters degree or more 20 - Business college 21 - College, number of years not known 25 - Annapolis 26 - West Point 30 - Trade School 31 - Nurses Training 32 - School for the Blind 33 - School for the Deaf 34 - X1 - Kindergarten - 11 punch X 40 - Illiterate or None 41 - Reads only 42 - Reads and writes 43 - Under school age (under 8 years) 50 - Ungraded room 51 - Special Schooling

Columns	Item
42-44 3	Usual Occupation XXX - Not reported or Unknown Do not punch. 991 - Public Assistance 992 - Pension from industry 993 - Social Security 994 - Disabled Veterans Pension 995 - No occupation or unemployed, 16 and over 996 - Retired - Use this code only if previous occupation is not known. 999 - No occupation - under 16 RRR - Student X01 - Over 60 and never employed (11 punch X) X02 - 16 to 24 and never employed X03 - 25 to 59 and never employed 6X6 - Housewife (alpha X) Code occupations according to the Occupational Titles code sheet and Dictionary of Occupational Titles.
45	Veteran Status 1 - World War II 2 - World War I 3 - Spanish-American War 4 - Korean War 5 - Peacetime 6 - None 9 - Other X - Not reported or Unknown Do not punch.
46	Relationship to Veteran X - Not reported or Unknown Do not punch. 1 - Spouse 2 - Child 3 - Parent 4 - No relationship to veteran
47	Citizenship X - Not reported Do not punch. 1 - American born 2 - Naturalized 3 - Alien
48	Type of Admission 1 - Observation 2 - Committed 3 - Voluntary 4 - Dangerous Insane 5 - Emergency 6 - District Court 7 - Informal 8 - Special Referral
49	Admission Status See supplemental sheet

Columns	Item
50-54 5	Previous Hospitalization Time XXXXX - Not reported or Unknown Do not punch. 00000 - None or 1st Admission Columns 50-51 years of hospitalization. Columns 52-54 days of hospitalization. Transfer In information On the Admission Card - The preceeding hospitalization is all added together and punched. On the Resident Card - The time is punched preceeding his hospitalization which began prior to his transfer.
55-58 5	Major Diagnosis XXXX - Not reported or deferred Do not punch. 9999 - No mental illness 8888 - Tests only Otherwise code diagnosis given.

TRANSFER IN INFORMATION

Admission Card - Code in black.
Resident Card - Code in red.

Admission Card - Date of Admission into institution.
Resident Card - If continuous hospitalization, code admission date when very first admitted. If not continuous hospitalization, code admission date prior to transfer. (X column 33)

Admission Card - Code (3) Transfer In.
Resident Card - If continuous hospitalization, code 1st admission (1). If he has previously been in the receiving institution, code an X above the one (X1). If not continuous hospitalization, code the appropiate type of readmission from his hospitalization prior to the current admission and place an X above the code if he has previously been in the receiving institution.

Admission Card - All previous hospitalization added together.
Resident Card - If one has had continuous hospitalization, code 00000. If not, code time previous to current admission.

COUNTY NUMBER CODE

No.	County	No.	County	No.	County	No.	County
001	Allen	027	Ellsworth	053	Lincoln	079	Republic
002	Anderson	028	Finney	054	Linn	080	Rice
003	Atchison	029	Ford	055	Logan	081	Riley
004	Barber	030	Franklin	056	Lyon	082	Rooks
005	Barton	031	Geary	057	Marion	083	Rush
006	Bourbon	032	Gove	058	Marshall	084	Russell
007	Brown	033	Graham	059	McPherson	085	Saline
008	Butler	034	Grant	060	Meade	086	Scott
009	Chase	035	Gray	061	Miami	087	Sedgwick
010	Chautauqua	036	Greeley	062	Mitchell	088	Seward
011	Cherokee	037	Greenwood	063	Montgomery	089	Shawnee
012	Cheyenne	038	Hamilton	064	Morris	090	Sheridan
013	Clark	039	Harper	065	Morton	091	Sherman
014	Clay	040	Harvey	066	Nemaha	092	Smith
015	Cloud	041	Haskell	067	Neosho	093	Stafford
016	Coffey	042	Hodgeman	068	Ness	094	Stanton
017	Comanche	043	Jackson	069	Norton	095	Stevens
018	Cowley	044	Jefferson	070	Osage	096	Sumner
019	Crawford	045	Jewell	071	Osborne	097	Thomas
020	Decatur	046	Johnson	072	Ottawa	098	Trego
021	Dickinson	047	Kearny	073	Pawnee	099	Wabaunsee
022	Doniphan	048	Kingman	074	Phillips	100	Wallace
023	Douglas	049	Kiowa	075	Pottawatomie	101	Washington
024	Edwards	050	Labette	076	Pratt	102	Wichita
025	Elk	051	Lane	077	Rawlins	103	Wilson
026	Ellis	052	Leavenworth	078	Reno	104	Woodson
						105	Wyandotte

TOPEKA RESIDENT POPULATION 5 THRU 19 YEARS (As of 6/30/70)

COUNTY	BIRTH-DATE	AGE AT ADMIN	EDUC @ ADMIN	SEX	RACE	RELIG	ADMIN STAT	MAJOR DIAGNOSIS	CITY OF RESIDENCE	EDUCATIONAL LEVEL
056	1954	16	11	1	1	1	1	30040	Emporia	11
089	1952	16	10	1	1	1	1	30720	Topeka	10
081	1955	10		1	4	1	1	29580	Manhattan	-
023	1952	16	12	1	1	1	1	30720	Lawrence	10
023	1954	14		1	1		1	30040	Topeka	10
089	1955	14		2	1		1	30720	Lawrence	7
043	1952	17	10	2	1	1	2	30720	Topeka	-
043	1953	17	8	1	1	1	2	30170	Holton	8
021	1954	16		1	1	1	1	30720	Herrington	-
085	1951	19		2	1	1	1	29530	Salina	-
023	1951	18	11	2	1	5	1	30150	Lawrence	11
059	1951	18	12	2	1	6	1	30040	McPherson	12
089	1957	9	1	1	1	1	1	29580	Topeka	1
019	1954	11		1	1	1	1	29580	Pittsburg	-
105	1960	9		2	1	1	6	29580	Kansas City	-
089	1955	12	1	1	1		1	29580	Topeka	1
018	1953	13	8	2	1	1	1	29580	Palmetto	8

080	1955	12	51	2	1	1	1	29580	Lyons (spec. educ.)	
021	1954	15		1	1	1	1	29590	Abilene	-
089	1954	14	8	2	2	1	1	30040	Topeka	8
107	1954	7	1	2	1	2	1	30150	Newton	-
028	1955	13	8	1	1	2	1	29580	Garden City	8
089	1957	12	7	2	1	2	1	29580	Topeka	7
023	1952	15	10	1	2	6	1	30181	Lawrence	11
089	1953	12		1	1	1	1	29580	Topeka (spec. educ.)	
089	1953	17	11	1	1	1	2	30181	Topeka	11
089	1953	16		1	2	1	1	29599	Topeka	-
056	1954	15		1	1		1	30720	Emporia	9
089	1957	12		2	1	1	1	29580	Topeka	-
070	1954	16	8	1	1	1	1	31100	Scrantor	8
046	1954	15	9	2	1	3	4	30720	Overland Park	9
089	1953	15	5	1	1	6	7	30189	Topeka	5
052	1951	17		1	1	1	1	29590	Leavenworth	-
023	1953	13	7	1	1	1	1	29530	Lawrence	7
081	1955	13		2	4	3	1	29530	Manhattan	-

089	1953	16	8	1	2	6	1	30720	Topeka	8
089	1953	16		1	2	1	1	30720	Topeka	-
046	1958	8		1	1		1	29580	Kansas City	-
089	1951	17		1	1	2	1	30720	Topeka	-
089	1954	14	8	1	3	5	2	30181	Topeka	8
089	1954	15	9	2	1	6	1	29599	Topeka	9
038	1960	8		2	1	1	1	29580	Syracuse	-
089	1953	14		1	1	1	1	29590	Topeka	-
089	1954	15	9	2	1	5	1	30040	Topeka	9
021	1951	18	10	1	1	1	2	30720	Herington	10
023	1951	18	11	1	1	1	1	29580	Lawrence	12
019	1958	9		1	1		1	29599	Topeka	-
040	1955	14	7	1	1	1	1	29580	Hesston	7
043	1953	16		2	3	5	1	30720	Holton	-
089	1955	15		2	1	1	1	29580	Lawrence	12
023	1956	13	6	1	1	1	1	29580	Lawrence	6
105	1958	8	1	1	1	2	1	29580	Bethel	1
052	1954	14	8	2	1	1	1	30720	Leavenworth	8
089	1955	14		2	1	5	1	30840	Topeka	-
070	1952	16 10	10	2	1	1	1	29620	Vassar	10

075	1951	16	9	2	1	5	1	30730	Wamego	9
023	1952	16	10	2	1	1	1	29590	Lawrence	10
089	1951	18	1	1	1	1	2	31000	Topeka	1
031	1956	10		1	1	1	1	29580	Fort Riley	-
044	1952	15		1	1	2	1	29580	Topeka	-
089	1956	7		2	1	1	1	29570	Topeka	-
059	1956	13	6	1	1	1	1	29580	McPherson	6
089	1957	11	3	1	1	6	1	29580	Topeka	3
105	1955	11		1	1		1	29580	Kansas City	-
089	1951	18	9	1	1	5	1	29590	Topeka	9
056	1953	14		1	1	1	1	30189	Americus	-
072	1956	10	3	1	1	1	1	29580	Salina	3
089	1954	14	9	1	1	1	2	30720	Topeka	9
001	1954	13	5	1			1	29580	Pittsburg	5
063	1962	6	43	1	1	1	1	29580	Havana	0
089	1957	12	4	1	1	1	1	29580	Topeka	4
089	1953	16	9	2	1	1	1	29530	Topeka	9
089	1954	16		1	1	1	1	30840	Topeka	-

066	1951	18	10	2	1	2	2	30720	Coffeyville 10
089	1952	1615		2	1		1	30720	Ottawa -
089	1951	1616	9	1	1	1	1	29580	Topeka 9
070	1952	17		1	1	1	1	29500	Quenemo -
087	1957	11	3	1	1	1	4	29580	Wichita 3
089	1954	8		2	1		1	29570	Larned -
087	1959	8	2	2	1	1	1	30710	Topeka -
073	1955	13		2	1	6	1	29580	Quenemo 11
008	1953	13		1	1	1	1	29580	Junction City 9
070	1952	17	11	2	1	1	1	29800	Topeka 10
089	1952	17	10	2	1	1	2	30720	Junction City 8
031	1955	15	8	2	1	1	1	31800	Salina 1
056	1952	16		2	1	1	1	30720	Lawrence 10
085	1956	11	1	1	1	2	1	29580	Topeka 4
023	1954	16	10	2	1	2	1	30189	Charute 1
089	1951	9	4	1	1	1	1	29580	Topeka 4
067	1959	8	1	1	1	5	1	29580	Charute 1
070	1954	1511	9	1	1	1	1	29580	Topeka -

011	1953	13	7	1	1	1	1	30120	Topeka	7
015	1951	18	10	1	1	5	1	30181	Concordia	10
089	1954	14	8	2	1	2	1	29580	Topeka	8
089	1951	18	8	2	1	1	1	31000	Topeka	8
053	1953	16	10	2	1	1	1	30170	Lincoln	10
089	1961	7	1	2	1	2	1	29580	Topeka	1
040	1954	15	9	1	1	1	1	30720	Newton	9
089	1954	15	10	2	1	1	1	30120	Topeka	10
021	1952	17	10	2	1	1	1	29530	Abilene	10
031	1954	12	51	1	2	1	1	29580	Junction City	(spec. educ.)
040	1955	14	8	2	1	1	7	30189	Newton	8
043	1951	18	12	2	1	3	1	29599	Witting	12
089	1952	14		2	1	5	1	29580	Topeka	-
009	1951	18		1	1	6	2	30181	Cottonwood Falls	-
078	1958	9		2	1	1	1	29580	Hutchinson	-
031	1954	15	7	1	2	1	1	30720	Juction City	7
105	1956	12	51	1	2	1	1	29580	Kansas City	(spec. educ.)
040	1960	9		2	1	1	6	29580	Burrton	-

089	1954	14		1	1	1	1	29580	Topeka	-
027	1951	14	8	1	1	1	1	29590	Wilson	8
078	1955	10		2	1	5	1	29530	Hutchinson	4
089	1958	11	6	1	1	1	1	29580	Topeka	6
089	1953	16	9	2	1	5	1	30720	Topeka	9
040	1953	14		2	1	1	1	29580	Newton	-
089	1953	15	10	1	1	1	1	29599	Tecumseh	10
089	1953	16		1	2	1	1	31240	Topeka	0
089	1953	15	10	2	2	1	1	30120	Topeka	10
007	1951	18	12	2	1	1	1	30040	Hiawatha	12
089	1951	18	10	2	1	1	1	29599	Topeka	10
034	1957	11		1	1	1	1	29580	Ulysses	-
089	1953	14		2	1	1	1	29590	Topeka	-
089	1956	13	6	1	1	1	1	30890	Topeka	6
089	1952	14		2	1	1	6	30720	Topeka	-
089	1954	14		1	1	1	1	29590	Topeka	-
052	1954	14	6	1	1	1	1	29590	Leavenworth	6
088	1959	10		1	2	1	1	29580	Liberal	-

052	1953	15	9	2	1	1	7	30182	Leavenworth 9
089	1956	13	6	1	1	1	1	29599	Topeka 6
052	1952	17	7	1	1	1	1	30170	Leavenworth 7
075	1952	17	10	1	1	1	2	30720	Belvue 10
023	1954	15		2	1	1	1	29590	Lawrence -
099	1951	19	12	1	1	1	1	29599	Maple Hill 12
089	1951	16		2	1		1	29580	Silverlake -
089	1953	16	10	2	1	1	1	29430	Topeka 10
087	1954	14	51	1	1	1	1	29580	Wichita (spec. educ.)
070	1956	13	4	1	1	5	1	30840	Carbondale 4
043	1955	14	7	1	1	1	1	29580	Soldier 7
089	1952	17	11	2	1	5	1	30187	Topeka 11
021	1951	18	12	1	1	1	6	29590	Abilene 12
056	1952	18		1	2	6	1	30720	Hays -
089	1954	15	10	1	1	2	2	30720	Topeka 10
089	1956	13	7	2	1	1	1	29580	Topeka 7
105	1958	11	4	1	1	6	1	29580	Kansas City 4
046	1955	12	6	2	1	1	1	29580	Shawnee 6
046	1962	7	1	1	1	1	1	29580	Kansas City 1
031	1953	16		2	1	6	1	29599	Fort Riley -

052	1953	16.		1	2	1	1	30720	Leavenworth 10
087	1957	12	6	2	1	1	1	29580	Wichita 6
046	1958	10		2	1	6	1	30189	Overland Park –
028	1956	13		1	1	2	1	29580	Garden City –
105	1955	9		1	2	1	1	29580	Kansas City –
089	1953	13	6	1	1	1	1	29580	Topeka 6
056	1951	16.		1	2	6	1	30181	Topeka –
034	1958	11		1	1	6	1	30189	Ulysses –
023	1954	13		2	1	1	1	29590	Lawrence –
079	1952	15	8	1	1	1	1	30720	Belleville 8
087	1956	13	7	2	1	1	6	29580	Derby 7
089	1951	18		1	1		1	29599	Topeka –
085	1953	15	9	1	1	1	1	29590	not listed
056	1953	16		2	1	1	1	29570	Emporia 10
089	1951	18	8	2	1	1	2	29590	Topeka 8
089	1955	15	8	2	1	1	1	30000	Topeka 8
089	1953	16	9	1	1	2	2	30720	Grantville 9
031	1951	19	11	1	2	1	2	29350	Juction City 11
031	1951	16.	7	1	1	1	1	30170	Juction City 7

031	1955	14	7	1	1	1	1	31080	Junction City 7
062	1957	8		2	1	6	1	29580	Topeka –
089	1954	15	9	2	1	1	1	30040	Topeka 9
003	1952	17	11	2	2	1	1	29599	Atchison 11
023	1955	14		2	1	1	1	30720	Lawrence –
026	1954	14		2	1	2	1	30313	Hays –
087	1953	12	6	1	1		1	29599	Wichita 6
046	1957	11	3	1	1	1	1	29580	Kansas City 3
008	1959	9	1	1	1	6	1	29580	Eldorado 1
046	1954	12	4	1	1	1	1	29580	Eldorado 4
089	1953	16	11	2	1	1	1	30040	Topeka 11
024	1956	12	7	2	1	1	1	29580	Kinsley 7
003	1953	15		1	1		1	31200	unlisted
040	1957	10	3	1	1	6	1	29580	Newton 3
089	1952	13	5	2	1	2	1	29580	Topeka 5
087	1957	6		1	1	1	1	29580	Wichita –
062	1956	12	6	1	1	1	1	29580	Beloit 6
022	1954	13	7	2	1	1	1	29580	Troy 7

031	1954	13	6	2	1	1	1	29580	Alta Vista 6
054	1953	15		2			1	29590	LaCygne 7
021	1952	17	8	1	1	1	2	29590	Abilene 8
058	1958	12	6	1	1	1	1	29580	Blue Rapids 6
057	1957	8		1	1	1	1	29392	Burns -
089	1953	16	9	1	2	1	2	30170	Topeka 9
089	1952	17	10	1	1	2	1	30840	Princeton N.J.(10)
089	1953	14		1	1	1	1	29580	Joplin, Mo. (-)
040	1951	15	7	1	1	1	6	29322	Newton 7
075	1955	15	9	2	1	1	1	31800	Wamego 9
089	1952	18	12	2	1	2	1	29800	Topeka 12
064	1953	16		2	1	1	1	29590	Council Grove 9
003	1954	11	5	2	2	4	1	29520	Atchison 5
070	1954	11		1	1	1	1	29580	Carbondale -
087	1955	11	2	1	1	1	1	29580	Wichita 2
087	1956	9	3	2	1	1	1	29580	Wichita 3
023	1955	13		2	1	5	1	30189	Lawrence -

C31	1955	13	6	2	2	1	1	29580	Fort Riley 6
037	1955	11		1	1	1	1	29580	Fall River -
031	1953	1526	9	1	1	1	1	29530	Milford 9
046	1955	12		2	1	1	1	29580	Kansas City -
089	1953	1633		1	1	1	1	30720	Topeka -
089	1952	14	7	2	1	1	1	29580	Topeka 7
080	1957	8		1	1	1	1	29580	Sterling 1
089	1959	10		1	1	5	1	29580	Topeka -

TOTAL = 209

OSAWATOMIE RESIDENT POPULATION 5 thru 19 YEARS

COUNTY	BIRTH-DATE	AGE @ ADMIN	EDUC @ ADMIN	SEX	RACE	RELIG	ADMIN STAT	MAJOR DIAGNOSIS	City
003	1955	14	8	2	1	1	1	30830	Kansas City
046	1953	16	10	1	1	1	1	30470	Fairway
019	1952	17	8	1	1	1	1	30840	Pittsburg
046	1952	17	51	1	1	1	2	30840	Leawood
067	1952	17	11	1	1	1	2	29530	Chanute
030	1957	12	7	2	1	1	1	30720	Ottawa
061	1951	17	51	1	1	1	5	31210	Osawatomie
046	1951	18	12	2	1	1	1	30000	Overland Park
046	1952	16	11	1	1	1	1	30720	Overland Park
018	1954	15	51	2	1	1	1	29510	Arkansas City
046	1953	17	11	2	1	1	1	30182	Olathe
105	1954	16	8	1	2	1	1	29590	Kansas City
008	1954	14	51	1	1	1	1	29580	Augusta
046	1953	15	5	1	1	1	1	29590	Mission
046	1952	17	9	1	1	1	1	30181	Shawnee
067	1951	19		1	1	1	2	29596	Chanute
105	1955	13	7	1	1	1	2	30720	Kansas City
105	1951	19	2	1	1	1	2	29590	Kansas City

061	1953	16	10	1	1	1	1	30720	Osawatomie
105	1952	18	3	1	1	1	5	31240	Kansas City
063	1954	15	8	1	1	1	1	30840	Coffeyville
008	1952	17	6	1	1	1	6	30720	Leon
046	1956	13	7	1	1	1	1	30720	Overland Park
063	1953	16	9	1	1	1	6	29580	Coffeyville
105	1955	14	7	1	1	1	1	30840	Wyandotte
046	1954	15	4	1	1	2	2	30720	Overland Park
105	1954	15	6	2	1	1	2	29550	Kansas City
046	1953	16	51	1	1	1	1	31160	Shawnee Mission
061	1951	17	11	2	1	2	1	29570	Bucyrus
050	1951	19	9	1	1	5	1	30720	Parsons
001	1951	18	10	2	1	1	1	30170	Iola
092	1951	17	51	1	1	1	4	30000	Smith Center
046	1954	15	51	1	1	1	1	30720	Olathe
018	1954	15	8	1	1	1	7	29580	Arkansas City
105	1951	19	12	1	1	2	1	29540	Kansas City
008	1951	18	12	2	1	1	4	29590	Augusta
046	1953	16	8	2	1	5	6	30720	Prairie Village

380 c1	1952	17	3	1	2	1	5	31180	Osawatomie
046	1954	15	8	1	1	2	1	30720	De Soto
046	1957	12	7	2	1	2	6	29580	De Soto
046	1953	16	51	1	1	1	6	31180	Johnson County
063	1952	17	10	2	2	1	1	30720	Independence
105	1953	17	2	2	2	1	8	29610	Bonner Springs
001	1952	17	10	2	1	2	2	30830	Iola

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LARNED RESIDENT POPULATION 5 THRU 19 YEARS (As of 6/30/70)

COUNTY	BIRTH-date	AGE @ ADMIN	EDUC @ ADMIN	SEX	RACE	RELIG	ADMIN STAT	MAJOR DIAGNOSIS	
087	1954	16	10	1	1	1	1	30120	
089	1952	17	6	1	1	1	4	30840	
089	1952	18	11	1	1	2	4	30720	
091	1955	14	8	2	1	1	1	30127	
087	1952	17	9	1	1	2	2	30720	
096	1951	18	10	1	1	5	1	29550	NO INFORMATION AVAILABLE
078	1953	16	10	2	2	1	2	30840	
105	1952	17	11	1	2	1	1	31000	
048	1953	16	11	1	1	2	1	29580	
088	1954	15	6	2	1	5	4	29580	
084	1953	16	11	1	1	1	1	30720	
087	1954	13	5	1	1	1	1	30710	
039	1953	16	9	2	1	1	1	30720	
087	1952	17	11	2	1	1	6	29530	
087	1953	16	8	1	1	1	1	30720	
078	1951	18	11	1	1	1	2	30850	
005	1954	15	51	2	1	1	4	31080	

087	1957	12	6	1	1	1	6	30040
008	1952	18	11	1	1	1	6	29520
078	1960	10	51	1	1	1	1	30922
087	1953	16	9	1	1	1	6	30720
087	1957	12	7	2	2	1	6	29580
087	1953	16	8	1	2	1	2	30200
088	1953	16	10	2	1	1	1	30720
035	1955	14	5	2	1	1	1	30728
087	1954	15	51	1	1	1	6	30720
092	1954	15	8	1	1	1	1	30830
088	1953	17	11	1	1	1	1	30720

087	1953	17	8	1	1	2	1	31190
078	1954	16	3	1	1	1	4	29580
034	1954	15	8	1	1	1	1	30720
078	1952	17	11	1	1	2	1	30170
078	1955	15	9	2	1	2	1	29574
078	1954	14	8	2	1	1	1	30830
087	1954	14	8	2	1	1	6	30720
102	1952	17	7	1	1	5	1	30720

088	1956	14	51	2	1	2	1	31100
087	1952	17	9	1	2	1	1	29550
087	1954	15	9	1	1	1	1	30720
089	1952	17	9	1	2	1	1	29530
087	1953	17	10	2	1	1	6	30720
087	1952	17	12	2	1	1	2	30720
087	1955	14	8	2	2	1	6	29500
089	1951	19	11	1	2	1	1	30181
087	1958	12	6	2	2	1	1	31800
078	1952	14	5	2	1	1	4	29580
019	1952	16	51	1	1	1	4	31000
087	1955	14	8	2	1	1	1	30728
078	1952	17	9	1	1	1	1	30840
078	1954	15	9	1	1	1	1	29580
029	1955	14	9	1	1	1	1	30720
087	1953	15	10	2	1	1	6	30830
071	1953	15	10	1	1	1	1	30720
088	1954	15	10	2	1	1	1	30720
078	1953	17	10	1	1	1	1	30720
087	1956	12	7	1	1	1	6	30800
087	1954	15	10	2	1	1	6	30720

57	031	1951	18	11	1	1	1	29530
58	087	1955	15	8	2	1	5	29590
	087	1954	16	8	1	2	5	31260
1	087	1956	13	7	2	1	1	30720
2	087	1954	15	10	1	1	6	29530
3	087	1956	14	7	2	1	6	29590
4	024	1958	11	4	1	1	1	30830
5	078	1952	17	12	2	1	7	30720
6	087	1956	13	7	1	1	6	30700
7	096	1952	18	9	1	1	1	30130
8	096	1954	15	9	1	1	1	29580
9	078	1951	18	10	1	1	1	29590
10	087	1954	15	8	2	2	1	6 30040
11	045	1951	18	12	2	1	1	29574
12	078	1951	19	12	1	1	2	2 29590
13	028	1951	18	8	2	4	1	1 30720
14	089	1955	14	7	1	2	1	1 31000
15	083	1952	17	11	1	1	1	6 29540
16	086	1953	17	11	1	1	1	1 30720

105	1953	14	9	2	1	1	6	30728
087	1955	14	7	1	1	1	6	30720
005	1952	16	9	2	1	1	1	31100
087	1953	16	8	1	1	1	6	30181
087	1958	12	51	2	2	1	6	31090
093	1951	18	9	1	1	1	1	29530
028	1954	15	8	2	1	1	2	30810
087	1953	16	9	1	1	1	6	30720
087	1955	15	9	1	1	1	6	30720
087	1951	19	51	2	1	1	2	29590
087	1955	13	7	1	1	1	6	29550
073	1951	18	9	1	1	1	2	30130
076	1955	14	51	1	1	1	1	30720
087	1953	15	9	1	1	1	6	29530
087	1956	13	7	1	1	1	6	30720
087	1954	16	10	2	1	1	1	30720

APPENDIX E

Emotionally Disturbed Programs in Kansas Public Schools

Department of Education, Division of Special Education,
"Emotionally Disturbed Programs in Kansas Public Schools,"
Topeka, Kansas, 1971

Location	Dist. #	Zip	Administrator (Supt.)	Teacher
DERBY	260	67037	L. L. Van Petten	Lois Cappitelli Norma Fultz
DODGE CITY	443	67801	Frank B. Toalson	Eva Lee Hufford
EMPORIA	253	66801	Dr. Carl A. James	Rebecca Ann Green
HUTCHINSON	308	67501	Dr. Harland L.R. Paschal, Supt. Raymond Feltner Director, Special Education 1520 North Plum	Calvin Polk
KANSAS CITY	500	66106	Dr. O.L. Plucker, Supt. Donald R. Lamb Director, Special Education 625 Minnesota, Library Bldg.	Richard Fox John Maes Anne McCoole Sue Norris
LARNED	495	67550	Alvah A. Turner	Alice Bamberger Dennis Fortmeyer Thomas Renshaw Ramsel Rogers V.M. Rogers John L. Schmidt Pauline Shoemaker
NEWTON	373	67114	Dr. Virgil R. Poore	Lloyd Holmes Barbara Kammerlohr
OLATHE	233	66061	Dr. M.L. Winters Herman Cline Director, Special Education Box 2000	Julia Smith Marilyn Bornholdt Mary L. Burke
OSAWATOMIE	367	66064	Ernest L. Swenson	Carolyn Firestone Roy Johnson Frieda Loughridge Roy W. Reed Robert Sheffield Ronald White

Location	Dist. #	Zip	Administrator (Supt.)	Teacher
SEAMAN	345	66608	Bruce Henoch Don B. Hawks Director, Special Education 1124 W. Lyman Road Topeka	Leo Loren Buss Alice Grace DeMarrias Mary Widner
SHAWNEE HEIGHTS	450	66542	Ferman P. Marsh Route 1, Tecumseh	Scott Johnson
SHAWNEE MISSION	512	66204 66207	Dr. Arzel L. Ball 7235 Antioch Dr. Ted W. Gray Director, Special Education 5101 W. 95th, Over. Pk.	Sandra Alley David Dickerson Marilyn Hayenga Lee Shank Gloria Simonson Jeanne Marie Stables Mary Lou Vest Diane Whitaker Jan Withers
TOPEKA	501	66603 66604	Dr. Merle Bolton 415 West 8th W.I. Green Director, Special Education 1725 Arnold	Lyman Boomer Lynda Boomer Mary Anne Carroll Lillian C. Cowan Jackie Flaharty Bennie Gaut Billie P. Hadley Beverly Harmon Dennis Hasson Beverly Henricks Sue Houdyshell Edwin Koehler Douglas Lawson Kathryn Payne Serita Peters David Pittser Thomas Proctor Gwynne Rees Dana Rooney Ronald Schmidt Diana Waggoner Eric Wesselowski
WASHBURN	437	66619	W. A. McElroy Don B. Hawks Director, Special Education 1124 W. Lyman Road Topeka	Wanda Lawson

Location	Dist. #	Zip	Administrator (Supt.)	Teacher
WELLINGTON	353	67152	Richard Waln	Susetta Waidley
			Barry Stanley Director, Special Education	
WICHITA	259	67202	Dr. A.E. Morris 428 S. Broadway	Robert Balman Velma Franz Joe Leach
		67214	Sam Seminoff Director, Special Education 640 North Emporia	Nancy Morgan Charlene Nixon Joe Ornelas Mary Schlintz John Stinson